



Office of the
Provincial Health Officer

Ebola Virus Disease Ethical Decision Making Framework

Provincial Ebola Task Force
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The BC Ebola Preparedness Task Force would like to thank the Provincial Forum for Clinical Ethics Support and Co-ordination and the Fraser Health ethics team for the use of their decision making framework, and for their participation in the development of an EVD-specific ethical framework.

Preamble

Since the fall of 2014, British Columbia (B.C.) has undertaken significant preparedness efforts to ensure it is prepared for any person who may be infected with the Ebola virus in the province. A complete range of evidence-informed guidance for this serious communicable disease has been collaboratively developed with health system partners, from identification of illness, through to treatment and care, to discharge or burial. Provincial policies and guidelines have been developed by inter-disciplinary, expert groups and recommended for approval by the B.C. Ebola Preparedness Task Force. This will ensure the best outcome for the patient, their family and the community, and ensure a safe environment for healthcare workers.

Complex decisions have been made at every step of this process, balancing often competing values and priorities. One important legacy of the experience has been the development of a framework for ethical decision-making. This approach to transparent decision making could be transferable to similar infectious disease outbreak contexts, where ethically challenging situations in both clinical practice and public health must be addressed.

The framework identifies a series of core values for decision making, and includes a practical, decision-making tool to support the systematic analysis and articulation of complex decisions and outcomes. The document provides a framework for making ethically justified and transparent decisions concerning policies and guidelines related to Ebola virus disease (EVD) in B.C., both at the provincial level and in the clinical context. At the clinical level, time-sensitive analyses and decisions should be both informed by and made by the part of the system most closely related to the provision of care (see Page 11).

This document is based on a tool developed by the Fraser Health ethics shared work team to support Ebola planning and management through their system-level ethics consultation process. The Fraser document built on previous ethics responses to SARS, H1N1 Influenza, and drug shortages, consultation with the literature, as well as insights from the Provincial Forum for Clinical Ethics Support and Co-ordination. The Fraser Health framework was then adapted by the B.C. Ebola Preparedness Task Force and health authority partners in collaboration with the Provincial Forum for Clinical Ethics Support and Co-ordination to create a framework for provincial-level decision making related to EVD in B.C.

Guiding Principles

In developing these ethical guidelines for decision making, the well-known clinical ethical principles of autonomy, beneficence and non-maleficence are melded with an expanded set of public health ethical principles. EVD is a potential public health crisis, and therefore broader community-focused public health ethics form a critical component of the overall guidelines.

Public health ethics, especially with respect to pandemics or outbreaks, has a different focus than traditional clinical ethics. The central dilemma in public health ethics is the question: to what degree is it

justifiable for a state to intervene on privacy and personal liberties of individuals in the name of the greater good of the broader population?

An EVD outbreak is an extreme public health crisis. Even an individual case is an extreme crisis insofar as its threat of spread. In recognition of that, it is crucial to find the balance between respecting individual rights and freedoms, and satisfying the needs of and protecting the broader public. The needs of the many do outweigh the few in such crises, and personal rights and freedoms must sometimes be constrained to some extent. Furthermore, although everyone matters equally, this does not necessarily mean that everyone will be treated in the same way. Any infringements must be carefully considered and the least restrictive or coercive means must be sought. Responses to situations are aimed at outcomes that favour the greatest number of people and the most effective use of resources if there are resource constraints.

Some of the relevant public health ethical principles that must be observed in the management of both individual cases and an outbreak are the following:

- ▶ **The Harm Principle.** A society has a right to protect itself from harm, real or threatened. The government is justified in intervening and possibly impinging on the rights of individuals to protect the community from harm.
- ▶ **Transparency/ Accountability.** Any planning, any policy, and any actions deriving from such policies, must be transparent and open to stakeholder input as well as available to public inspection. All plans and all decisions must be made with an appeal to reasons that are mutually agreed upon and work toward collaboratively derived goals.
- ▶ **Respect.** To whatever extent possible individual autonomy and individual liberties must be respected. This means respect for privacy and confidentiality, and an obligation on behalf of leaders and care providers to be truthful and honest to individuals affected.
- ▶ **Distributive Justice/ Fairness.** Everyone matters equally but not everyone may be treated the same. There are three competing forces in fair delivery of care and services and balances must be struck:
 - persons ought to have equal access to health care resources (equality) but,
 - those who most need and can derive the greatest benefit from resources will be offered resources preferentially (prioritarianism, and equity), and
 - resources will be divided such that the maximum benefits to the greatest number will be achieved (utilitarianism, and efficiency).
- ▶ **Procedural Justice/ Fair Process.** There will be accountability to a fair and transparent process throughout the planning and implementation of managing EVD.
- ▶ **Proportionality.** Measures implemented, especially restrictive ones will be proportionate to and commensurate with the level of threat and risk.

- ▶ **Least Coercive and Restrictive Means.** Measures for containing and treating EVD will be the least restrictive and coercive possible.
- ▶ **Reciprocity.** If measures are implemented, every reasonable step must be taken on behalf of the health authority and government to enable members of society to adhere to the measures. This may mean financial or other compensation to quarantined individuals.
- ▶ **Precautionary Principle.** It is often necessary to respond to public health threats before full information on the context is available. In anticipating one or many cases of EVD or in managing actual cases, actions may need to be taken before a complete set of data exists. Flexibility is also essential as any plan must be iterative and adapted to new knowledge that arises.
- ▶ **Solidarity/ Working Together.** Cooperation is essential to this international threat – between individual citizens, health regions, provinces, and nations.

Framework Structure

The B.C. Ebola Virus Disease Ethical Decision Making Framework includes three main parts:

1. A set of core values with associated commitments that any issue or potential policy guidance must be tested against.
2. A ranking of these commitments, prioritized to represent the most defensible decision making for B.C. related to EVD.
3. A decision making tool to support the ethical assessment of an EVD-specific policy, and to articulate the decision and rationale in detail.

Core Values

At the base of every decision is a set of core values that the decision must be tested against. Wherever possible, decisions related to EVD policy or guideline development in B.C. should be designed and applied in a way that meets all of the values listed below. The values below are grouped into themes, with each theme including a set of commitments.

Table 1: EVD Core Values

Protecting the...	Value Theme (alphabetical)	Detailed Description
Patient	Duty to Care	Our decisions should... <ul style="list-style-type: none">• Be based on physicians', staff and system-level responsibility (duty) to provide care even when it involves potential exposure to some risk of harm.

Protecting the...	Value Theme (alphabetical)	Detailed Description
Patient	Patient Well-being : persons under investigation and confirmed cases of EVD	<p>Our decisions should ensure patients with Ebola symptoms (and their loved ones) are...</p> <ul style="list-style-type: none"> • Engaged in a way that is respectful and mindful of power dynamics and life circumstances; and • Given the best care possible (not just treatment), including: <ul style="list-style-type: none"> ○ Protection of their privacy. ○ Preventing preventable harm while waiting for diagnosis and treatment. ○ Having their values and beliefs guide their treatment decisions.
Patient	Integrity	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Include clarity about what interventions will and will not be offered and the rationale for these decisions. • Provide an avenue for an individual or a system/team impacted by a decision who disagrees with it to ensure they understand the reasons for it and, where appropriate, appeal it through the appropriate channels. • Ensure system level integrity.
Patient	Proportionate Restriction (least restrictive means)	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Minimize restrictions on the freedom of individuals and coercion of individuals to behave in ways that do not align with their values and beliefs. • Be commensurate with the level of risk to broader wellbeing that acting otherwise would pose.
Patient	Patient safety and wellbeing - system	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Ensure non-Ebola related patients (i.e. all of the other patients in the system who are not related to EVD) continue to receive respectful, appropriate and timely care.
Provider	Care Provider Safety, Well-being and Sustainability	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Expose as few health care providers as possible to patients with Ebola symptoms. • Minimize the risk to care providers of being exposed to Ebola. • Minimize the risk to care providers of other (indirect) harms (physical, moral, emotional, psycho-social, etc.) to their well-being. • Ensure the best available resources are provided to allow care providers to safely care for patients with Ebola symptoms.
Provider	Reciprocity	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Support providers, patients, public who take on burdens (e.g., quarantine) to minimize and mitigate those burdens. • Support those negatively impacted by decisions made.
Provider	Respect for Colleagues	<p>Our decisions should support staff and physicians to...</p> <ul style="list-style-type: none"> • Treat each other with kindness, care and compassion. • Communicate in an informed, thoughtful way.

Protecting the...	Value Theme (alphabetical)	Detailed Description
Public	Clear, Complete and Timely Communications	<p>Our messaging should...</p> <ul style="list-style-type: none"> • Be complete, clear, responsive, accurate, consistent and timely. • Provide rationale for decisions. • Be released as required for the purpose of managing the situation. • Protect the personal information of all involved.
Public	Equity	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Treat all patients in similar situations similarly (e.g., like as like – small town as other small town). • Pay special attention to the needs of vulnerable patients. • Not discriminate based on morally-unjustifiable reasons. • Ensure equity in: support/training/expertise/resources to teams/sites across the province (e.g., all five centres that have been designated to test for EVD have equity in resources). • Ensure health care resources, including support, are distributed based on need. • Ensure risks are fairly distributed.
Public	Trust	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Engender trustworthiness amongst those working in the system and between the public and provincial health care systems.
Public	Protection of the Public from Harm	<p>Our decisions should...</p> <ul style="list-style-type: none"> • Reduce the net harm to the public (including through the spread of disease, disruption to essential activities and services, from fear of the unknown). • Enhance solidarity with those most affected.
Public	Justified Decision-Making	<p>Our decisions should be...</p> <ul style="list-style-type: none"> • Based on the best available evidence and well-grounded assumptions. • Explicitly values-based. • Consistent with our decision-making framework. • Consistent across the province, and supported at the provincial level. • Made transparent to all those who might be impacted by them. • Informed by national/international partners, (learn from and contribute to the conversations and dialogues at federal and international levels). • Made by the part of the system most closely related to the impacted area: <ul style="list-style-type: none"> ○ Rationale: have expertise ○ Rationale: most impacted/effected/distressed by carrying out decision <p>Note: This doesn't preclude others from having a say/consultation in this. It is crucial that decisions are consistent across province.</p>

Commitments

The core values presented above are not prioritized because the specific commitments within an individual theme are not necessarily equally important. However, for ethically justified decision making, certain commitments must be prioritized over others. Table 2 lists specific commitments stemming from the core values, and groups them into three priority categories.

In some circumstances, value-trade-offs will have to be made. Where it is not possible to live up to all values, the decision should live up to the higher-ranking value(s) at stake.

While the rationale for these should be provided on a case-by-case basis, Table 2 provides a rationale for the highest priority core values and for why some of the lower priority core values are considered relatively less important.

Table 2: Commitments and Priority Level

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
1	Treat all patients in similar situations similarly (e.g., like as like – small town as other small town).	Equity	People are different from one another. Some of these differences justify treating people differently (e.g., people with different types of illness require different treatment). Some differences (such as skin colour) do not justify different treatment. When people who are different are treated differently, good reasons should be provided to justify this differential treatment.	Patients
1	Minimize the risk to care providers of being exposed to Ebola.	Care Provider Safety, Well-being and Sustainability	There is system-level responsibility to provide the best available resources to allow care providers to safely care for patients with Ebola symptoms. In addition, the protection of health care providers who come into contact with potential Ebola patients is important to prevent disease spread.	Care Providers
1	Distribute health care resources, including care provider support, based on need.	Equity	Resources (including care provider training, location of experts, etc.) should be distributed based on explicit and well-justified criteria (such as the prevention of viruses likely to cause high morbidity/mortality).	Patients

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
1	Ensure patients with Ebola symptoms are given the best care (not necessarily treatment) possible	Patient Well-being		Patients
1	Are based on the best available evidence and well-grounded assumptions.	Justified Decision-Making	Without an accurate understanding of the facts, it is difficult to make effective decisions. This is especially important in the EVD context when the facts are changing often and significantly.	Society
1	Ensure all patients who present with Ebola symptoms receive a consistent level of care, regardless of where they present.	Equity		Patients
1	Minimize the net harm to the public, (including through the spread of disease, disruption to essential activities and services, etc.).	Community Well-being (solidarity, integrity)	Protecting the physical safety of the broader community (patients and families, health care providers, and the community at large) and protecting the ongoing functioning of society is critical.	Society
1	Recognize physicians, staff and system-level responsibility (duty) to provide care even when it involves potential exposure to some risk of harm.	Duty to Care	Accepting the role of care provider and the benefits that accompany this special function includes a commitment to use the intellectual and material resources especially available to serve the interests of those who must rely on the care provider for their well-being.	Care Providers
1	Support providers, patients, and public who take on burdens (e.g., quarantine) to minimize and mitigate the direct harm from these burdens. (Our decisions should support those negatively impacted by decisions made.)	Reciprocity	Society has a special obligation to minimize the harm faced by providers, patients and public who put themselves at extra risk to protect the safety of the broader community.	Care Providers, Patients, Society

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
1	Expose as few health care providers as possible to patients with Ebola Symptoms.	Care Provider Safety, Well-being and Sustainability	Exposing as few people as possible (health care providers, other patients, etc.) is important to prevent the spread of the disease.	Care Providers
1	Protect the personal information of all involved.	Community Well-being (solidarity, integrity)		Society
1	Enhance trust of the health care system by the public.	Trust	Because much of the harm from Ebola will come from fear and anxiety in society over the possible severe consequences of an outbreak, it is crucial to minimize this harm, give the public reason to allay these fears and communicate these reasons to them.	Society
1	Minimize the risk to care providers of other (indirect) harms (physical, moral, emotional, psycho-social, etc.) to their well-being.	Care Provider Safety, Well-being and Sustainability (Reciprocity)	In addition to visible risk of direct harm, those involved in times of societal difficulty may be exposed to hidden harms to their wellbeing broadly understood. The special obligation to minimize such harm faced by health care providers who put themselves at extra risk to protect the safety of the broader community equally requires being supported.	Care Providers
1	Engage patients with Ebola symptoms (and their loved ones) in a way that is respectful and mindful of power dynamics and life circumstances.	Equity	During times of scarcity and emergency we should be especially cautious that our decisions not reinforce the marginalization of vulnerable people. Patients suspected to have Ebola (and their loved ones) will be even more vulnerable than other patients in the system. They will be isolated, interacted with in unusual ways, and likely be treated with fear. Special measures will be required to ensure that they be treated with the respect and care they deserve.	Patients

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
1	Are consistent across the province, and supported at the provincial level; and live up to the established core values for Ebola planning and management, consistent with other decisions we have made.	Justified Decision-Making	Protecting the integrity of society as a whole and the individuals affected requires acting according to clear and defensible values.	Society
1	Prevent patients from coming to preventable harm while waiting for a diagnosis of their illness.	Patient Well-being: suspect cases	Protecting public safety may require that patients with health care needs may not have these needs met. This is justified because the good for the community is greater than the physical safety and wellbeing for any individual member of that community.	Patients
1	Ensure non-Ebola related patients (i.e. all of the other patients in the system who are not related to EVD) continue to receive respectful, appropriate and timely care.	Patient Safety and Well-being: system	Ideally, additional resources would be added to the system to ensure that non-Ebola patients are unaffected by the resources diverted to this public health emergency. However, in some cases this is not possible and in others not likely. Having the protection of public safety result in decreased capacity to meet the needs of non-Ebola patients is justified because of the possibility that the spread of the virus could have a significant, harmful impact on the broader community, much greater than that of delayed health care service for non-Ebola patients. (Note: if the resources required to deal with Ebola cause the harm to non-Ebola patients to become greater than the threat to the community, then this rationale is no longer valid.)	Patients

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
1	Respect the privacy of the patient and their family.	Patient Well-being: persons under investigation and confirmed cases of EVD	Patients suspected to have Ebola are especially vulnerable to public scrutiny and social stigmatization. Society has a special duty to protect their privacy as a part of the commitment to respecting their choice about who has access to information about them.	Patients
2	Enable messaging to be clear, consistent, timely, and purpose (not pressure) driven.	Clear, Complete and Timely Communication	Ensuring people understand the reasons for decisions increases the likelihood of following these decisions; this can only happen if good reasons (values-based) are in place.	Society
2	Enable messaging to include the reasons why the decision has been made.	Clear, Complete and Timely Communication	Ensuring people understand the reasons for decisions increases the likelihood of following these decisions; this can only happen if good reasons (values-based) are in place.	Society
2	And their rationale are made transparent to all those who might be impacted by them.	Justified Decision-Making		Society
2	Enhance solidarity in society, especially with those most affected.	Community Well-being (solidarity, integrity)		Society
2	Are made by the part of the system most closely related to the impacted area.	Justified Decision-Making	<p>Ensuring that decisions are based on the best understanding of the facts around providing direct care requires that decisions be informed and made by those who have the expertise (oftentimes those providing care in an impacted area).</p> <p>Because they will be providing the care, individuals working in the area will be most impacted and distressed by carrying out a decision.</p> <p>Additionally, the size of the decision-making group and time-sensitive nature of infectious disease outbreaks requires that decisions be made by individuals close to the site (e.g. hospital) that will carry out caring and/or treatment of infected patients.</p>	Society

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
2	Minimize restriction or coercion as much as possible, commensurate with the level of risk to broader societal well-being.	Proportionate restriction (least restrictive means)	Protecting public health and health care sustainability may require limiting the range of choices those impacted may have, beyond what is considered acceptable under usual circumstances. While this is acceptable given the threat to public health posed by Ebola, restrictions and coercions are only justified to the extent that the potential presence of the virus actually does pose a threat to public health and well-being.	Society
2	Enable greater trust of the health care system by the staff.	Trust	Effectively meeting the health care needs of the public requires a human resource base that trusts that their needs will be met by the system. If this is not in place, system breakdowns can occur that can threaten normal operations and effective implementation of Ebola management strategies.	Care Providers
2	Ensure that where a patient or loved one is impacted by a decision, they are given the reasons for the decision and have opportunities for responding and, where appropriate, appealing the decision through the appropriate channels.	Respect for Patients and Families	At times, recourse to appeal may not be possible in a timely way and so may be effectively denied. If this is truly the case, then this would be justified again because the protection of public safety outweighs respect for the integrity of the individual member of that community.	Patients
2	Provide clarity about what interventions will and will not be offered and the rationale for these decisions	Community Well-being (solidarity, integrity)		Patients
2	Support staff and physicians to treat each other with kindness, care and compassion.	Respect for colleagues		Care Providers
2	Support staff and physicians to communicate (with each other) in an informed, thoughtful way.	Respect for colleagues		Care Providers

Priority level	Commitment: It is important that our decisions...	Value theme	Rationale	Protecting...
3	About care are made based on the values and beliefs of patients.	Patient Well-being : suspect cases	Treatment possibilities for patients suspected to have Ebola will be more constrained than for non-Ebola patients, further restricting the possibility of having patient values and beliefs inform treatment plans. This is justified because the protection of public safety outweighs respect for the integrity of the individual member of that community.	Patients

Decision Making Process

The following steps are designed to assess if a particular decision/policy lives up to the core values:

Step 1: Name the question or issue you are trying to address.

Step 2: Review the Core Values for Ebola management and build a solution that tries to live up to the core values.

Step 3: Complete the following checklist review of the proposed solution:

Priority	Does this decision...	Value Theme	Yes	No	Only if...	N/A
1	Treat all patients in similar situations similarly, (e.g. like as like – small town as other small town	Equity				
1	Minimize the risk to care providers of being exposed to Ebola	Care Provider Safety, Well-being and Sustainability				
1	Distribute health care resources, including care provider support, based on need	Equity				
1	Ensure patients with Ebola symptoms are given the best care (not necessarily treatment) possible	Patient Well-being				

Priority	Does this decision...	Value Theme	Yes	No	Only if...	N/A
1	Are based on the best available evidence and well-grounded assumptions	Justified Decision-Making				
1	Ensure all patients who present with Ebola symptoms receive a consistent level of care, regardless of where they present	Equity				
1	Minimize the net harm to the public, (including through the spread of disease, disruption to essential activities and services, etc.)	Community Well-being (solidarity, integrity)				
1	Recognize physicians, staff and system-level responsibility (duty) to provide care even when it involves potential exposure to some risk of harm	Duty to Care				
1	Support providers, patients, and public who take on burdens (e.g., quarantine) to minimize and mitigate the direct harm from these burdens. (Our decisions should support those negatively impacted by decisions made.)	Reciprocity				
1	Expose as few health care providers as possible to patients with Ebola Symptoms	Care Provider Safety, Well-being and Sustainability				
1	Protect the personal information of all involved	Community Well-being (solidarity, integrity)				
1	Enhance trust of the health care system by the public	Trust				

Priority	Does this decision...	Value Theme	Yes	No	Only if...	N/A
1	Minimize the risk to care providers of other (indirect) harms (physical, moral, emotional, psycho-social, etc.) to their well-being	Care Provider Safety, Well-being and Sustainability (Reciprocity)				
1	Engage patients with Ebola symptoms (and their loved ones) in a way that is respectful and mindful of power dynamics and life circumstances	Equity				
1	Are consistent across the province, supported at the provincial level, and live up to the established core values for Ebola planning and management, consistent with other decisions we have made	Justified Decision-Making				
1	Prevent patients from coming to preventable harm while waiting for a diagnosis of their illness	Patient Well-being - suspect cases				
1	Ensure non-Ebola related patients (i.e., all of the other patients in the system who are not related to EVD) continue to receive respectful, appropriate and timely care	Patient Safety and Well-being - system				
1	Respect the privacy of the patient and their family	Patient Well-being - persons under investigation and confirmed cases of EVD				

Priority	Does this decision...	Value Theme	Yes	No	Only if...	N/A
2	Enable messaging to be clear, consistent, timely and purpose (not pressure) driven	Clear, Complete and Timely Communications				
2	Enable messaging to include the reasons why the decision has been made	Clear, Complete and Timely Communications				
2	And their rationale are made transparent to all those who might be impacted by them	Justified Decision-Making				
2	Enhance solidarity in society, especially with those most affected	Community Well-being (solidarity, integrity)				
2	Are made by the part of the system most closely related to the impacted area. (e.g., children's hospital organization should make decisions that will be carried out by their team for caring for children)	Justified Decision-Making				
2	Minimize restriction or coercion as much as possible, commensurate with the level of risk to broader societal well-being	Proportionate restriction (least restrictive means)				
2	Enable greater trust of the health care system by the staff	Trust				

Priority	Does this decision...	Value Theme	Yes	No	Only if...	N/A
2	Ensure that where a patient or loved one is impacted by a decision, they are given the reasons for the decision and have opportunities for responding and, where appropriate, appealing the decision through the appropriate channels	Respect for Patients and Families				
2	Provide clarity about what interventions will and will not be offered and the rationale for these decisions	Community Well-being (solidarity, integrity)				
2	Support staff and physicians to treat each other with kindness, care and compassion	Respect for Colleagues				
2	Support staff and physicians to communicate (with each other) in an informed, thoughtful way	Respect for Colleagues				
3	About care are made based on the values and beliefs of patients	Patient Well-being - suspect cases				

Step 4: Check to see whether the solution meets higher-ranking values over lower-ranking values.

- a. If it does, go to Step 5.
- b. If it does not, revise the solution to ensure the higher-ranking values are met and then go to Step 5.

Step 5: Check to see whether the solution lives up to all of the core values.

- a. If it does, congratulations, and move forward!
- b. If it does not, revise the solution to ensure as many of the core values are met as possible, then go to Step 6.

Step 6: If any of the core values remain unmet, articulate which of these are unmet and why it is important to move forward even though we cannot live up to our core values in this case.

Step 7: Complete the following decision articulation template to describe the decision and rationale.

- a. State the decision as cleanly as possible.
- b. Identify key factual assumptions the decision rests on.
- c. Identify:
 - i. Any values the decision does not live up to, why this is justified, and what if anything can be done to minimize the resulting harm.
 - ii. Any conditions that will have to prevail for the decision to live up to the core values and any additional steps required to ensure these conditions are met.
- d. State who will be responsible for housing, following up on and maintaining the decision.

Decision Articulation Template

A) The Decision:

B) Key Facts (or assumptions about the facts):

-
-
-

C) Rationale:

This policy does not live up to our commitment to...

- The values of a, b, c....

This is justified because...

- We believe that x is more important than a, b, c, because....

The harm that comes from not living up to these commitments can be minimized by...

The policy will require contingent actions to live up to our commitments to...

To meet these commitments we will require...

D) Where the decision will rest and who is responsible for ensuring it is revised if the facts change:

Conclusion

B.C. has developed a complete range of evidence-informed guidance to ensure that the province is prepared for any patient who may be infected with the Ebola virus. Complex decisions have been made at every step of this process, balancing often competing values and priorities. One important legacy of the experience has been the development of this framework for ethical decision-making. The framework can be applied by the Ministry of Health and health authorities to a variety of challenging decision-making processes, including future infectious disease outbreaks.