# CLINICAL ETHICS CONSULTATION SERVICE



## HOW DOES clinical ethics consultation work?

An ethicist will support all parties involved in:

- Identifying the issues;
- · Clarifying the values and principles at stake;
- Analyzing the options and supporting the thought process behind the preferred option;
- · Determining the preferred option.

The clinical ethics consultation service has a power of recommendation. It will not decide for you, but will **COUNSEL**, **ASSIST** and **SUPPORT** you.

# What is the BEST THING TO DO?

If a situation appears complex or it seems difficult to make a fair or acceptable decision, an ethics consultation is recommended to support you in your decision making.

A confidential service available to users and employees of the CIUSSS de l'Ouestde-l'Île-de-Montréal.



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Centre intégré universitaire de santé et de services sociaux de l'Ouest-del'Île-de-Montréal



# WHO CAN request an ethics consultation?

- · Any member of the care team
- · Patients, their family and loved ones

### HOW TO REQUEST an ethics consultation?

Contact the clinical ethics consultation service by writing to <a href="mailto:ethique.comtl@ssss.gouv.qc.ca">ethique.comtl@ssss.gouv.qc.ca</a> (preferred).

If you are unable to send an email, you can call 438-864-1492.

You can also ask someone from the care team to contact the service for you.

If the consultation concerns service users under 18 years old, contact paediatric ethics by writing to: <a href="mailto:franco.carnevale@mcgill.ca">franco.carnevale@mcgill.ca</a>

#### WHAT IS a clinical ethics consultation?

Every day, treating teams, users and their loved ones make decisions regarding care and services. Those decisions are not always medical, sometimes they are moral decisions. Everyone attaches a different weight to the same values and ethical principles, and this can lead to ethical dilemmas.

The clinical ethics consultation service can help you address such ethical questions.



#### WHEN TO consult ethics?

At any time during the episode of care and services, for example when:

- The values and beliefs of a service user, their family or the team are in conflict with what is medically possible.
- The team feels uncomfortable with a service user's request to stop curative treatments.
- The team wonders what decision would be best, while considering both the best interests of a child and the rights of the child's parents (contact paediatric ethics).
- A relative must decide for a service user
  who cannot participate in the decision-making
  process and the relative has questions about
  the role of substitute decision-maker
  and whether the treatment recommended
  by the team is in accordance with the service
  user's wishes.

