

## CONFIDENTIAL

### ORGANIZATIONAL ETHICS CONSULTATION REQUEST FORM

Urgency of request:

Within 3 business days

3-10 business days

Within 3 weeks

Person making the request:

Health Care Provider

Health Care Team (group)

Leadership/Management/Board

Clinical Guidelines [https://www.princeedwardisland.ca/sites/default/files/publications/clinical\\_and\\_organizational\\_ethical\\_decision-making\\_guidelines.pdf](https://www.princeedwardisland.ca/sites/default/files/publications/clinical_and_organizational_ethical_decision-making_guidelines.pdf)

#### 1. Explore

**What are the problems?**

**Is this your problem to solve? If not, to whom does it belong?**

**What do you want to achieve?**

**What do you want to avoid?**

## 2. Discuss

<b>What are the options?</b>
<b>Apply criteria to each option (as outlined in the <i>Clinical and Organizational Ethical Decision-Making Guidelines</i>).</b>
<u>External Environment</u>
<u>Governance Context</u>
<u>Service, Quality and Performance</u>
<u>Values and Ethics</u>
<u>Integrity</u>

## 3. Act

<b>Identify the decision(s)</b>

**4. Implementation**

<b>Who leads?</b>
<b>Who needs to know?</b>
<b>What are the results?</b>
<b>How will the results be measured?</b>

Consultation requested by (Dept./ Division name)	Date of Request for Consultation	Contact Number/Email

Please send your completed form by email to [clinicaethics@ihis.org](mailto:clinicaethics@ihis.org)