Ethics Framework for Ramping Down Elective Surgeries and Other Non-Emergent Activities During the COVID-19 Pandemic

In preparing for and responding to the COVID-19 pandemic, Ontario hospitals were directed to take a planned approach to ramping down elective surgeries and non-emergent activities in order to preserve capacity. Current circumstances require that our health system acts as good a steward of available resources. **Stewardship** requires that we manage and develop resources and be accountable for using those resources so as to best ensure public wellbeing. This overarching principle requires identifying and preserving priority programs or services that may not be provided elsewhere, monitoring health resource utilization and distribution to adjust scheduling as needed, and collaborating with health system partners to provide optimal care to Ontarians. This should be done according to a fair process and should be guided by key ethical principles.

Principles to guide decisions

Decisions to ramp down elective surgeries and other non-emergent activities should be guided by the following principles:

- **Proportionality:** Decisions to ramp down or cancel services should be proportionate to the real or anticipated limitations in capacity to provide those services.
- **Non-maleficence:** Decisions should strive to minimize harm wherever possible. Ramping down or cancelling activities that are expected to have fewer implications for morbidity/mortality if delayed too long should be prioritized over those expected to have higher implications for morbidity/mortality if delayed too long. This requires considering the differential benefits and burdens to patients and patient populations as well as available alternatives to relieve pain and suffering.
- Equity: Equity requires that all persons in the same categories (e.g., at different levels of urgency) be treated in the same way unless relevant differences exist, and that special attention is paid to actions that might further disadvantage the already disadvantaged or vulnerable. This requires considering time on wait lists and experiences with prior cancellations. Decision-makers should strive to consider the interests between the needs of COVID-19 patients and patients who need time-sensitive treatment for other diseases and conditions.
- **Reciprocity:** Certain patients and patient populations will be particularly burdened as a result of our health system's efforts to preserve capacity related to COVID-19. Consequently, our health system has a reciprocal obligation to ensure that those burdened by these decisions continue to have their health monitored, receive appropriate care, and can be reevaluated for emergent activities should they require them.

Principles to guide decision-making processes

The preceding principles should be balanced and applied in a fair process. This includes the process of determining what constitutes 'non-emergent' activities. Decision-making processes should be guided by the following principles:

- **Transparency:** Decisions to cancel or otherwise ramp down elective surgeries and non-emergent activities should be communicated in a transparent manner to patients and to the broader community served. Justifications, based on the values and principles in this document, should accompany these communications.
- **Consistency:** Decisions (e.g., about what constitutes 'non-emergent' activities, when to ramp down vs. cancel services, etc.) should be consistent so that all patients in the same categories are treated in the same way unless relevant differences exist.
- **Inclusiveness:** Decisions should be made explicitly with stakeholder views in mind, and where possible there should be opportunities to engage stakeholders in the decision-making process.
- Accountability: Those making decisions must be accountable for those decisions—that is, they should justify their decisions and be held responsible for them. Defence of decisions should be grounded in the other ethical values and principles outlined in this document.
- **Trust:** Trust is enhanced by upholding the process values enumerated above. In particular, ongoing communication with patients and the broader community served will be essential to engendering trust.