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# Accountability for Reasonableness (A4R)

An ethics and values based framework for planning, priority setting, and allocation of resources

**Eastern Health** 

## Accountability for Reasonableness: An ethics and values based framework for planning, priority setting, and allocation of resources

Accountability for reasonableness provides a framework by which the fairness of priority setting in health care can be evaluated. This framework provides an ethics and values-based lens to assist programs and departments prepare for and participate in the priority setting, planning of budgets and other resource allocation decision making. It also provides an ethics rationale for taking new initiatives, dealing with redundancies, and responding to gaps in the Eastern Health (EH) program and service mandates. The components of the Accountability for Reasonableness Framework are flexible. They can be fitted into the established planning and budgeting structures and processes.

This framework is designed to allow adequate consideration of the Vision, Mission, Values, Mandate and strategic directions of Eastern Health (EH) as well as consideration of Program and Department Operational Plans.

Resource allocation decisions are made at different operational levels in the health care system. The decisions and perspectives at each level impact others levels and decisions. Typically, these levels of the complex health care system are identified as macro, meso, and micro levels. There is inevitable overlap and significant influence from one level to another. Regardless of the operational level, the process should be fair, informed, open (transparent), accountable, and responsive.

Macro Level is the highest level of resource allocation. It is at the macro level that bodies provide support and resources to other levels. The resource allocations are usually connected to the mandate and broad strategies. In this case, it includes the federal and provincial governments' plans and allocations for health care.

Meso Level is the mid-range of the broader system and structure, such as regional health authorities (RHA) and school boards. Meso-level institutions typically have substantial identity and, like EH, have a Vision, Mission, and Core Values that give direction to their strategic plans and activities. This level spans the broader organization as well as the more focused and service delivery components such as departments, programs, and divisions.

Micro Level is the decision-making and service delivery at the front line: physicians, nurses, paramedics, public health workers, laboratory workers, custodial services and numerous other health care workers. Micro level decisions and actions are often influenced by professional codes of ethics, organizational values, and personal ethics.

A framework to guide fair, informed, open, accountable and responsive priority setting and resource allocation is an essential tool in a values-based organization such as EH. Some resource and priority setting practices and approaches are not quite adequate in the modern context.

➤ Generic allocation and priority setting is not an option. Simply expanding or shrinking previous allocations based on percentage calculations does not allow for the flexibility or responsible shifts that may be necessary to meet the current mandate, vision, or strategic directions. Continuing with the same priorities and generically adjusted budgets without review or evaluation does not allow adequate adjustment to

- new technologies or services, and adjustments to regional integration, rationalization, and redundancies.
- Pushing the decisions back to the macro level is not an option. RHAs are expected to articulate their priorities through their strategic planning processes. Governments have clearly signaled an expectation for balanced budgets from health care organizations. More money for current programs from provincial or federal government outside of the strategic planning process is unlikely, other than in truly exceptional cases.
- Leaving decisions and allocations to the micro and bedside allocation is to renege on the administrative and stewardship responsibilities for interpreting the values and priorities of society. This brings with it the need to collaborate with the community.
- ➤ The costs of delivering health services will likely continue to increase at rates out of proportion to the resources.

This framework uses values as the points of reference to articulate the reasonableness of decisions. The framework organizes the relevant values in three categories: Terminal, Substantive, and Procedural Values.

The **Terminal Value** is the end or overall goal pursued by EH. It is the Vision: *Healthy People, Healthy Communities*. The Mission Statement of EH gives specific focus to current activities and the strategic plan. The Mission Statement is "By March 31, 2017, Eastern Health will have improved programs and services to increase its safety, quality, accessibility, efficiency and sustainability and to contribute to the overall health of the population."

The **Substantive Values** are the **EH Core Values**. They are basic convictions that give meaning and direction to the things deemed important. It is because of core values that we can identify what is important to us as individuals, groups, and society. These values are based upon beliefs and attitudes. They involve what is desirable, and help us know whether we are working in the right direction to bring about what we really want. EH has identified five core values through a comprehensive consultation process. They are all relevant to resource allocation to greater or lesser degrees. EH Core Values are *Respect*, *Integrity, Fairness, Connectedness, and Excellence*.

The **Procedural Values** lay out the directions and parameters for decision-making processes. They typically give direction regarding who should be involved, how evidence is considered, and who should know about the decisions. The Procedural Values ensure the decision-making process facilitates doing the right things and doing things right. The Procedural Values in this framework are *Relevance*, *Publicity*, *Revision*, *Enforcement and Empowerment*.

Resource allocation decisions frequently require selection of one option over another, or selection of a few from many requests for resources. The framework provides some specific considerations to assist with identification of priorities for resource allocation. Such considerations include whether an option is unavoidable, essential to achieve established standards, responsive to growth, an initiative to replace curtailed or rationalized services, provincial jurisdiction and expenditure, and other reasonable concerns.

Ethics and values based decision making strives to consider the relevance of all identified values. It should not focus on one value only as justification for a decision. Considered together, and in the spirit of Accountability for Reasonableness, the decision makers ought to be able to explain to reasonable people the extent to which any and all values are considered in making a particular choice and establishing priorities.

# Accountability for Reasonableness Throughout the Priority Setting and Budgeting Process

This framework provides a structure to ensure ethics and values-based considerations are integrated to the priority setting and budgeting process. The resources below are intended for use at three phases in the process; the preliminary phase, deliberation phase and accountability phase.

### I. Preliminary Phase: Review and Discussion of Foundations

In preparing and planning for significant priority setting and resource allocation discussions and decisions, participants and stakeholders ought to review the foundational statements: the Vision, Mission, and Core Values of EH.

These foundational statements were established and confirmed through a collaborative and consultative process with the community, other health care agencies, and government. Strategic directions, planning, and resource allocation must be congruent with these foundations (Appendix A). Review and discussion of these foundations are appropriate before moving on to the more established tasks of identifying, assessing specific items, issues, and needs for consideration in the priority setting process.

### II. Deliberation Phase: Ethics and Values Analysis

Decision makers will systematically consider each item specified through the needs identification and assessment process in light of the Vision, Mission, Core Values and Procedural Values. The deliberation phase follows the preparatory work of profiling needs, options and costs of items proposed as priorities. The Ethics and Values Analysis Table (Appendix B) allows for organization and easy reference during consultation, discussion, and decision-making. The Table also provides for consideration of each proposed priority in light of the established strategic directions of EH (2014-2017): Quality and Safety, Access, Sustainability and Population Health.

Other practical realities are also relevant in sorting priorities. Decision-makers must consider whether a proposed priority is unavoidable, practice standard, driven by growth, an innovation, reinvestment, provincial jurisdiction, or urgent in some other way.

Unavoidable: Essential to mandate with little or no opportunity to influence demand or processes.

Standards of Practice: Canadian standards or guidelines adopted in clinical practice.

Growth: Strategic intention to increase level of an existing service.

Innovation: Introduction of a new technology or procedure.

Reinvestment: The proposed option will allow reduction or curtailment of a less efficient or less effective service. This relies on evidence of cost effectiveness.

Provincial Jurisdiction: Some services are beyond RHA mandate and require provincial decisions and investment.

Other: Program or Department unique situation and rationale.

Having completed the tasks of budget preparation, priority categorization, review of the Guiding Principles on Resource Allocation and the Strategic Issues, the Program can finalize the priorities and rationale with revisions generated through this process.

### III. ACCOUNTABILITY

The rationale for priority selection must be able to withstand the critique of stakeholders and reasonable members of the community. When decision makers have gone through the information gathering, organizing, discussing and deciding on priorities and resource allocations they must be ready and able to account for the decisions made and anticipate future adjustments and revisions. Communication is essential to accountability. The decision makers must prepare a communication plan and identify effective means of communication with appropriate stakeholders regarding current decisions. The communication ought to inform of the changes, the anticipated challenges, and the plan for evaluation and revision. Decision makers ought to inform stakeholders of their decisions and provide opportunity to account for their decisions. An Accountability Checklist (Appendix C) is provided to remind leaders and participants of matters essential to Accountability for Reasonableness. The Accountability Phase completes the priority setting process and makes way for implementation of action plans.

# **Resource Materials**

# Appendix A

#### ETHICS FOUNDATION

EH has a Vision, Mission, and Core Values established and confirmed through a collaborative and consultative process with the community, other health care agencies, and government. Strategic directions, planning and resource allocation must be congruent with these foundations. As a first step into this framework all participants should review these items.

**Vision:** Healthy People, Healthy Communities

Eastern Health recognizes that we must focus upon both individual and community approaches to health. Healthy communities enhance our prospect for individual health. When individuals are healthy, communities are healthy. Eastern Health is committed to working with our partners towards our vision of *Healthy People*, *Healthy Communities*.

Mission: By March 31, 2017, Eastern Health will have improved programs and services to increase its safety, quality, accessibility, efficiency and sustainability and to contribute to the overall health of the population.

**Measure:** Improved programs and services

**Indicators:** Increased safety and quality

Increased rate of client satisfaction

Improved access to selected services

Improved employee engagement

Balanced budgets

Monitored outcomes in selected areas of population health

The mission statement for 2014-2017 reflects the organization's commitment to providing the best possible care and service to its patients/clients/residents, their families and communities. It also reflects the organization's commitment to a sustainable system and ties to the overall vision of *Healthy People, Healthy Communities*. The mission statement is written to incorporate six years, or two planning cycles (2011-14 and 2014-2017).

### **Core Values**

Values are basic convictions that give meaning and direction to the things that are important. It is because of values that we can identify what is important to us as

individuals, groups, and society. Values are based upon beliefs and attitudes. They involve what is desirable, and help us know whether we are working in the right direction to bring about what we really want. EH has identified five core values. They are all relevant to resource allocation to greater or lesser degrees. Below are some considerations from each Core Value.

**I. RESPECT:** Recognizing, celebrating and valuing the uniqueness of each patient/client/resident, employee, discipline, workplace, and community that together are Eastern Health.

### Considerations:

- Does this course of action reflect respect for individual of groups of patients/clients/residents and employees?
- Have those likely to be most impacted been consulted?
- Is there potential for vulnerable people to lose a service or be denied a necessary service?
- Will this initiative impact the way people feel respected and valued?
- Will this facilitate the balance of work and personal life for employees?

**II. INTEGRITY:** Valuing and facilitating honesty and open communication across employee groups and communities as well as with patients/clients/residents of Eastern Health.

#### Considerations:

- Are we open and honest about our understandings, beliefs, and actions?
- How does this reflect our belief that accountability for our actions is key to integrity because any action by an individual who is part of the Eastern Health system will affect the rest of the system?
- How is this consistent with our value to demonstrate open consultation and honesty in our interactions with patients/clients/residents and employees and in our communications with the general public, political leaders, and the media?
- How does this show we have listened to others and demonstrate that we have heard by taking this action?
- Are we honest about our strengths and our limitations?
- What would we say to account for the reasonableness of this initiative to each other, to those in other employee groups, to our patients/clients/residents, and to our communities?

**III. FAIRNESS:** Valuing and facilitating equity and justice in the allocation of our resources.

#### Considerations:

- Stewardship is essential to fairness. Are we responsible in our management of our resources?
- How does this show we value and facilitate the just allocation of resources across patient/client/resident groups, employee groups, and communities?
- Are we using best practices?
- How does this reflect the best interests of future generations?

**IV. CONNECTEDNESS:** Recognizing and celebrating the strength of each part, both within and beyond the structure, that creates the whole of Eastern Health.

### Considerations:

- How does this initiative strengthen the connections within Eastern Health?
- Are there any ways that this weakens the connectedness within and beyond Eastern Health?
- How does this initiative reflect our commitment to facilitate and promote internal and external communication, consultation, and collaboration?
- How does this reflect our belief that the cultural, social, economic, and environmental contexts of our various geographical communities affect, and are affected by, the work of Eastern Health, and our commitment to act with this in mind?
- **V. EXCELLENCE:** Valuing and promoting the pursuit of excellence in Eastern Health.

### Considerations:

- What will be the impact of this initiative on the ongoing professional and personal development of individuals who are part of Eastern Health?
- How does this initiative have impact on community capacity to enhance health and wellbeing?
- What considerations are relevant to safety and employee competence?

### **Procedural Values**

Accountability for reasonableness identifies five conditions of a fair priority-setting process.

**Relevance:** Decisions should be based on reasons (i.e., evidence, principles, values, and arguments) that fair-minded people can agree are relevant under the circumstances. Fair-minded people are defined simply as those who seek in principle to cooperate with others to find mutually justifiable solutions to priority-setting problems.

**Publicity:** Decisions and their rationale should be transparent and made publicly accessible.

**Revision:** There should be opportunities to revisit and revise decisions in light of further evidence or arguments, and there should be a mechanism for challenge and dispute resolution.

**Enforcement:** There should be either voluntary or public regulation of the process to ensure that the first three conditions are met.

**Empowerment:** There should be efforts to optimize effective opportunities for participation in priority setting and to minimize power differences in the decision-making context.

# Appendix B

## **Ethics and Values Analysis Table**

This table ensures that needs identified and items proposed as priorities are considered in light of the foundations and values of EH. The consistent format and process supports fairness in priority setting and resource allocation.

An ethics and values analysis of matters helps clarify the rationale for ranking priorities and options that compete for limited resources.

Comments and notes can be jotted to the table cells as a means to logue the considerations and discussions.

Department / Program		Division	
Issue / Option:			
Values	Com	ments on relevance to the issue	
Vision			
Healthy people, healthy communities			
Core Values (See descriptions in Appendix A)			
Respect:			
Integrity:			
Fairness:			
Connectedness:			
Excellence:			

<b>Procedural Values</b>		
Relevance		
Publicity		
·		
Revision		
Ti C		
Enforcement		
Empowerment		
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EH Strategic Plan (201	4 -2017) Directions	
Many discussions and resource allocation decisions are subsequent to the higher level Strategic Plan priorities and directions. The relevance of these priority directions should be considered and noted.		
Safety and Quality		
Access		
110000		
Sustainability		
•		
Population Health		

Other Prioritizing Considerations		
Unavoidable		
Standards of Practice		
Growth		
Initiative		
Reinvestment		
Provincial Jurisdiction		
Other		

## Appendix C

### **Accountability Checklist**

Consideration of the priorities through an ethics lens will ensure that decisions made are consistent with the Vision, Mission and Values of EH. This Checklist reminds leaders and participants of matters essential to Accountability for Reasonableness.

### **Inclusion Test**

1. Who are the known stakeholders impacted by these decisions?

Clients

Service providers

Advocacy groups

Special interest

Community

**Politicians** 

Media

Other

2. Has there been adequate consultation and collaboration with stakeholders?

### **The Resource Allocation Process**

- 1. Are there any identified relevant interests not being considered?
- 2. Has there been adequate consideration of options and alternatives?
- 3. Has there been adequate consultation and articulation of impacts on patients, staff, or other health care services within EH or beyond?

#### The Ethical Tests

### Fiduciary Test:

- 1. Are we reflecting the trust bestowed on us as health care professionals and managers by serving the best interests of present and future populations?
- 2. How have the interests of vulnerable people been heard (e.g. minorities, elderly, mentally ill)?
- 3. Are we balanced in our response to lobby efforts or stakeholder pressure (advocacy groups, special interests, threats, workforce, media, etc.)?

### Fair Dealing Test:

- 1. Are we dealing fairly with all parties?
- 2. Do individuals and groups have access to the services they need?
- 3. Are the services available within a reasonable time?
- 4. Are all individuals with the same health care needs being treated in the same way?

### Good Stewardship Test:

- 1. Are we using public resources efficiently for the intended purposes?
- 2. Do we give adequate attention to finding ways to make better use of the limited available resources?

### Public Processes Test

- 1. Have those who will be impacted by decisions been consulted in proportion to the impact?
- 2. Are there alternatives that have not been adequately explored?
- 3. Are we ready to account for the reasonableness of decisions to those who want to know about our priority setting processes and decisions?

### **Evaluation and Revision**

- 1. What is the process to evaluate the current decision or decisions?
- 2. When and how will necessary adjustment or revisions be made?

### **Communications**

- 1. Who will take the lead for the communications plan?
- 2. What resources will be needed to communicate effectively with those identified above?

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