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Issued by:	Chair of the Board		
Authorized by:	Board of Directors 		
Board Policy re: Code of Ethical Conduct			

Statement of Board Policy

The Perley and Rideau Veterans' Health Centre (Perley Health) is committed to having an ethical culture that is reflected in the behaviour of the individuals associated with Perley Health. All directors, officers, members, staff, residents, tenants, clients, and volunteers are expected to maintain the highest ethical standards, to behave lawfully, in a reasonable and prudent manner, and to adhere to and be guided by the **Core Values of Perley Health** (Appendix A), which were developed as part of the Strategic Plan (**Whither the Perley Rideau v. II**) and are articulated within it.

To support the maintenance of an ethical culture, Perley Health shall:

- ensure that all policies, practices, research and ways of doing business are carried out in accordance with ethical standards and the law and that they are measured and assessed accordingly;
- have policies and procedures that govern the investigation and resolution of allegations of ethical impropriety or ethical issues/dilemmas that may arise; and
- ensure that those reporting ethical concerns may do so without fear of reprisal and are not subject to retaliation or retribution of any kind.

As Perley Health is primarily the home of its residents and tenants, it shall be operated in a way that will ensure that it is a place where they may live with dignity, and in security, safety and comfort. In so doing, Perley Health shall adhere to and be guided by the **Residents' Bill of Rights** as set out in the **Fixing Long-Term Care Act, 2021** (Appendix B).

Definitions

Ethical behaviour is conduct that is morally correct, honourable, just, principled, and trustworthy.

A **Resident** refers to a person admitted for long-term care at Perley Health and, where appropriate, includes the resident's family and/or other support network.

A **Tenant** refers to a person who pays rent for the right to live in a rental unit at Perley Health.

A **Client** refers to a person receiving care at Perley Health or from Perley Health staff and, where appropriate, includes the client's family and/or support network.

Expected Behaviours

All will be committed to:

Responsibility to the Individual

- Promote the well-being of all residents, tenants, and clients of Perley Health.
- Strive to provide the highest possible quality of appropriate services.
- Use courtesy, tact and cooperation in all interactions with residents, tenants, clients, other staff, volunteers and visitors.
- Respect the customs, beliefs, language, property and autonomy of others.
- Protect the confidentiality of all personal information.
- Act always to prevent harm.

Responsibility to the Workplace

- Help to ensure a culture of the highest level of integrity.
- Report any legal or ethical concerns in confidence and without fear of reprisal.
- Exercise accountability in all actions.
- Comply with all applicable laws, policies, and procedures.
- Disclose any and all conflicts of interest.
- Recognize limits of competence and expertise and act within them.
- Be truthful about qualifications and expertise.
- Not tolerate any form of abuse, harassment or discrimination, and report any such behaviour to the appropriate authority in accordance with Perley Health policies and procedures.
- Not use Perley Health resources for personal benefit.
- Help to ensure the protection and proper use of Perley Health assets.

Roles and Responsibilities

The Board:

The Board is responsible for ensuring that this Policy is respected in the conduct of the people covered by this policy and in its policies, practices and research. The Board shall:

- Lead by example in its practices and the behaviours of Board members.
- Ensure there are Core Values expressly articulated for Perley Health.
- Adhere to this Code, and the policies included within it, in all its decisions and actions.
- Investigate any evidence or allegations of ethical impropriety concerning individual Board members or ethical issues/dilemmas pertaining to Board business or functioning and ensure that there is a process in place to deal with allegations of any such ethical impropriety. (See Appendix C.)
- Provide advice and direction to the Chief Executive Officer (CEO) on ethical issues that may arise.

- Monitor the effective implementation of this Policy by the CEO, and consider Perley Health's ethical performance in evaluating the CEO's performance annually.

Directors shall sign annually and adhere to an Oath of Office (see *Oath of Office* in Part II, Chapter 4, Appendix B).

The Governance Committee:

The Governance Committee has general oversight of this Policy, its implementation and its review.

The Chief Executive Officer (CEO):

The CEO is responsible for promoting an ethical culture at Perley Health and for establishing the necessary policies, practices and structures to implement this Policy. The CEO shall:

- Ensure that documentation and procedures are in place so that all staff, residents, tenants, clients, and volunteers are informed of the Code of Ethical Conduct of Perley Health (including the Residents' Bill of Rights and the Core Values of Perley Health), and of the professional and association codes applicable at Perley Health.
- Ensure that all operational policies, procedures and structures of Perley Health are in compliance with this Policy.
- Ensure that policies, procedures and structures are in place so that services are delivered and decisions are made according to this Policy. This may include any significant decision that:
 - affects residents, tenants, or clients;
 - might positively or negatively impact on the mission of the organization and/or;
 - would affect local communities, vulnerable populations or the environment.
- Promote a blame-free culture and trust within Perley Health with policies and mechanisms in place to ensure that staff, residents, tenants, clients, visitors and volunteers can report ethical concerns or pose questions of an ethical nature without fear of retribution or reprisal and that such issues are investigated and resolved in a timely, transparent and objective manner. This includes the establishment of:
 - An Ethics Consultation Service that is available to any individual in the Perley Health community, for any reason, at any time, and without fear of reprisal.
 - An Ethics Advisory Committee to formulate policies and provide advice on ethical standards and ethical dilemmas arising from clinical, treatment, or research activities at Perley Health.
 - Non-retaliation protection so that staff, residents, tenants, clients, visitors and volunteers are free to alert those in authority to potential ethical dilemmas without fear of reprisal or retribution.
- Ensure that policies and procedures are in place so that all research performed at Perley Health is undertaken in the best interests of Perley Health, conducted in an ethical manner and performed pursuant to approval by a recognized research ethics board. The CEO shall further ensure that in approving any research the impact on resources, operations and reputation are considered and deemed acceptable.
- Report at least annually to the Board on any ethical issues investigated, ethical policies or procedures developed or implemented, and the research activities being carried out at Perley Health. Any significant ethical issues that may negatively impact Perley Health or its reputations shall be reported to the Board as they arise in a timely manner)

Policy Review

The Board shall review this Policy and its implementation as required, or at least every three years.

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Appendix A
to the Code of Ethical Conduct

Core Values of Perley Health

Perley Health operates under the belief that ageing well is rooted in living well – that there is joy in living every day. We also believe that each person is unique and valuable, and is entitled to purposeful, person-centred and compassionate healthcare. Our core values and the expected behaviours that flow from them will guide the implementation of our strategy and the realization of our vision.

Compassion is to understand the condition of others, and to commit oneself to the caring necessary to enhance health and quality of life, and to relieve suffering. We commit to:

- Providing a safe, comfortable, caring and friendly environment, and ensuring a good quality of life;
- Maintaining flexibility and adaptability in relationships;
- Displaying empathy, tolerance and forgiving in all interactions.

Respect is the basis of all of our relationships. Accordingly, we commit to:

- Taking a person- and family-centered approach to care;
- Respecting cultural, social, gender, class, spiritual, and linguistic differences;
- Maintaining respect for our unique responsibilities to both Veteran and community residents;
- Respecting privacy and confidentiality;
- Respecting all members of the team – their contributions and views are valued, acknowledged and rewarded;
- Valuing ongoing and open communication.

Integrity and ethical practice must permeate all actions of Perley Health. We commit to:

- Honesty and trustworthiness in all that we do;
- Being accountable and responsible for all of our actions.

Excellence. Perley Health is dedicated to achieving excellence in all that we do and commits to:

- Excellent quality of care;
- Employing caring, engaged staff committed to excellence, innovation and continuing improvement;
- Taking pride in what we do.

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**Fixing Long-Term Care Act, 2021
Residents' Bill of Rights**

3 (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

RIGHT TO BE TREATED WITH RESPECT

1. Every resident has the right to be treated with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality, regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability.
2. Every resident has the right to have their lifestyle and choices respected.
3. Every resident has the right to have their participation in decision-making respected.

RIGHT TO FREEDOM FROM ABUSE AND NEGLECT

4. Every resident has the right to freedom from abuse.
5. Every resident has the right to freedom from neglect by the licensee and staff.

RIGHT TO AN OPTIMAL QUALITY OF LIFE

6. Every resident has the right to communicate in confidence, receive visitors of their choice and consult in private with any person without interference.
7. Every resident has the right to form friendships and relationships and to participate in the life of the long-term care home.
8. Every resident has the right to share a room with another resident according to their mutual wishes, if appropriate accommodation is available.
9. Every resident has the right to meet privately with their spouse or another person in a room that assures privacy.
10. Every resident has the right to pursue social, cultural, religious, spiritual and other interests, to develop their potential and to be given reasonable assistance by the licensee to pursue these interests and to develop their potential.
11. Every resident has the right to live in a safe and clean environment.
12. Every resident has the right to be given access to protected outdoor areas in order to enjoy outdoor activity unless the physical setting makes this impossible.
13. Every resident has the right to keep and display personal possessions, pictures and furnishings in their room subject to safety requirements and the rights of other residents.
14. Every resident has the right to manage their own financial affairs unless the resident lacks the legal capacity to do so.

15. Every resident has the right to exercise the rights of a citizen.

RIGHT TO QUALITY CARE AND SELF-DETERMINATION

16. Every resident has the right to proper accommodation, nutrition, care and services consistent with their needs.
17. Every resident has the right to be told both who is responsible for and who is providing the resident's direct care.
18. Every resident has the right to be afforded privacy in treatment and in caring for their personal needs.
19. Every resident has the right to,
- i. participate fully in the development, implementation, review and revision of their plan of care,
 - ii. give or refuse consent to any treatment, care or services for which their consent is required by law and to be informed of the consequences of giving or refusing consent,
 - iii. participate fully in making any decision concerning any aspect of their care, including any decision concerning their admission, discharge or transfer to or from a long-term care home and to obtain an independent opinion with regard to any of those matters, and
 - iv. have their personal health information within the meaning of the *Personal Health Information Protection Act, 2004* kept confidential in accordance with that Act, and to have access to their records of personal health information, including their plan of care, in accordance with that Act.
20. Every resident has a right to ongoing and safe support from their caregivers to support their physical, mental, social and emotional wellbeing and their quality of life and to assistance in contacting a caregiver or other person to support their needs.
21. Every resident has the right to have any friend, family member, caregiver or other person of importance to the resident attend any meeting with the licensee or the staff of the home.
22. Every resident has the right to designate a person to receive information concerning any transfer or any hospitalization of the resident and to have that person receive that information immediately.
23. Every resident has the right to receive care and assistance towards independence based on a restorative care philosophy to maximize independence to the greatest extent possible.
24. Every resident has the right not to be restrained, except in the limited circumstances provided for under this Act and subject to the requirements provided for under this Act.
25. Every resident has the right to be provided with care and services based on a palliative care philosophy.
26. Every resident who is dying or who is very ill has the right to have family and friends present 24 hours per day.

RIGHT TO BE INFORMED, PARTICIPATE, AND MAKE A COMPLAINT

27. Every resident has the right to be informed in writing of any law, rule or policy affecting services provided to the resident and of the procedures for initiating complaints.

28. Every resident has the right to participate in the Residents' Council.
29. Every resident has the right to raise concerns or recommend changes in policies and services on behalf of themselves or others to the following persons and organizations without interference and without fear of coercion, discrimination or reprisal, whether directed at the resident or anyone else:
 - i. the Residents' Council.
 - ii. the Family Council.
 - iii. the licensee, and, if the licensee is a corporation, the directors and officers of the corporation, and, in the case of a home approved under Part IX, a member of the committee of management for the home under section 135 or of the board of management for the home under section 128 or 132.
 - iv. staff members.
 - v. government officials.
 - vi. any other person inside or outside the long-term care home.

Further guide to interpretation

(2) Without restricting the generality of the fundamental principle, the following are to be interpreted so as to advance the objective that a resident's rights set out in subsection (1) are respected:

1. This Act and the regulations.
2. Any agreement entered into between a licensee and the Crown or an agent of the Crown.
3. Any agreement entered into between a licensee and a resident or the resident's substitute decision-maker.

Enforcement by the resident

(3) A resident may enforce the Residents' Bill of Rights against the licensee as though the resident and the licensee had entered into a contract under which the licensee had agreed to fully respect and promote all of the rights set out in the Residents' Bill of Rights.

Regulations

(4) The Lieutenant Governor in Council may make regulations governing how rights set out in the Residents' Bill of Rights shall be respected and promoted by the licensee.

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Board Process for the Resolution of Ethical Issues

1. Allegations of ethical impropriety with respect to a Board member are presented to the Chair of the Board of Directors (or if the matter involves the Chair, to the Chair of the Governance Committee of the Board of Directors) in writing and include the ethical issue with which there is a concern.
2. The ethical issue and potential resolutions are disclosed to all people involved or who have direct interest in the resolution of the issue. Individuals informed shall be given the opportunity to respond to the issue and provide other options for resolution, within a reasonable time established by the Chair of the Board of Directors.
3. The Chair of the Board of Directors (or if the matter involves the Chair, the Chair of the Governance Committee of the Board of Directors) consults with the Executive Committee who makes a recommendation to the whole Board of Directors on the matter. The Ethics Consultation Services may also be accessed if required.
4. The Board of Directors receives the recommendation of the Executive Committee in the presence of the individual named in the allegation and asks the individual if he/she has any further representations. The Board of Directors votes on the recommendation of the Executive Committee.
5. Ethical dilemmas not involving individual impropriety but related to the work of the Board are brought to the attention of the Chair of the Board of Directors and investigated by the appropriate committee of the Board. The committee may ask for the assistance of management in the investigation. The committee makes a recommendation to the Board of Directors on how best to resolve the matter. The Board of Directors votes on the matter.
6. If the individual who made the allegation or raised the ethical dilemma is not a member of the Board, the decision of the Board is communicated in writing to the individual.

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