



## POSITION STATEMENT

### Ethical Considerations of Personal Protective Equipment (PPE) During Scarcity

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The purpose of this statement is to address the ethical considerations around PPE for healthcare teams. The standard PPE deemed appropriate for a given situation will depend on many factors including the current knowledge base, the performed procedure, current rate of infection in the community and many other factors. This paper will not address appropriate PPE. The purpose of this paper is to develop an ethical framework in the event of scarcity of PPE.

COVID-19 is forcing us to face new challenges as healthcare teams. This is a battle we are fighting for our patients and our community, and we must fight it together. Our frontline workers are putting themselves in harm's way and they are being tasked with making incredibly difficult decisions. This sacrifice needs to be acknowledged; everyone matters, and everyone deserves to have their safety as a priority. CAS supports evidence-based guidelines for PPE, recognizing in the rapidly developing epidemiology of COVID-19 that the evidence may evolve, and this should dictate change.

**There is no absolute obligation to provide care in the context of undue risk.** The moral justification for this position relies on several principles. It is under exceptional circumstances, such as extreme human and material resource scarcity, that underlying tensions and conflicts between fundamental principles are revealed. The first principle: every person is of immeasurable value; being deserving of both dignity and respect. Healthcare workers are in the possession of critical skills that take years to master and these skills are a resource that should be utilized for the public good. This is our oath to society, yet our moral worth cannot be reduced to just our skill set.

True professions flourish in the context of a social contract with clear reciprocal obligations. In our everyday practice healthcare workers accept a level of risk. This risk is increased during times of natural disaster, war, and pandemic. Healthcare workers regularly show up to care for patients despite this knowledge of our personal risk. We take our obligations to our community very seriously. Health systems and governments as part of this social contract owe obligations as well. **Their obligations include reducing the risks their healthcare workers are exposed to by providing appropriate PPE.** They need to support their health teams when difficult decisions around safe and efficient resource utilization are required.

A sustainable healthcare system is one critical factor in social cohesion, helping to stabilize society. This is made more obvious during times of crisis, but there is never a time when this sustainable health system is not required to support our society. As healthcare teams we understand that our professional obligations extend to our whole community, now and in the future. While our attention is focused on COVID-19, there are still healthcare needs that exist outside this pandemic. We need to be prudent with all our healthcare resources, including our health professionals so that these needs can be met.

Recognizing our collective duty to the public good, we must take care to minimize risks to our healthcare teams.

CAS makes the following recommendations:

- 1) In the event of inadequate supplies, the first step to mitigate the risk is to limit the personnel that will be exposed; this may require changes to workflow. Safety considerations must always be assessed as workflow changes may make the risks of proceeding with a case unacceptable.
- 2) If supplies become greatly diminished there may not be adequate access to PPE to meet the evidence-based standards. Risk assessment in these circumstances may dictate that cases should not proceed. CAS supports their membership in making these assessments, recognizing again our role in ensuring the safety of all members of the team.
- 3) In our role as leaders within teams, it is the ethical obligation of the anesthesiologist to ensure that **all team members** have the appropriate PPE for providing care. Ensuring access to the appropriate PPE is a system level responsibility and every effort should be made to ensure that staff have the protection they require.
- 4) We would strongly encourage the use of disposable N95 masks which have been properly fit tested as first line equipment. Use of reusable masks and reprocessed disposable masks should be considered as the quantity of disposable masks becomes limited. These masks must meet the same quality and filtration standards as the disposable single use N95 masks. Reusable masks specifically should be fit tested, and an appropriate cleaning protocol identified.

With regards to PPE we can anticipate shortages and a response plan will be required. The ethics of resource allocation in this pandemic is one that requires a principled approach that recognizes that we work in teams. Two main principles guide how we approach the issue of scarce resources: equity and utility. Equity does not imply equality, rather it emphasizes fairness that recognizes that needs and key vulnerabilities can vary and these variabilities matter. The principle of utility helps in making a moral judgement based upon an aggregate aim to maximize a perceived benefit, balanced against the avoidance of harm. Implied in this principle of utility is efficiency, that seeks to utilize resources in a manner that benefits the largest group rather than the individual.

Based on these principles, CAS makes the following recommendations with respect to N95s and respirators:

- 1) These resources should be deployed in such a manner that addresses urgent need and acute shortages.
- 2) These resources are too valuable to not be utilized to their maximum capacity; they should not sit idle while the potential for harm exists. For individuals or groups who have purchased their own equipment (specifically N95 masks), We would, under circumstances of scarcity, encourage these individuals to donate this equipment to their hospital or department to ensure that those providers who are on the front line of the pandemic and require this equipment for their own safety be provided this equipment. We **strongly** discourage the stockpiling of N95 or equivalent masks for personal protection.

- 3) If the sharing of personal PPE is not considered a reasonable option, consider again our role as leaders. When colleagues are being faced with the incredibly difficult decisions, and a member is in possession of personal PPE CAS would encourage members with PPE to, as much as possible, volunteer to take on the roles that require enhanced PPE.
- 4) In the context of privately purchased equipment we would strongly advise healthcare institutions to permit the use of privately purchased equipment for the purposes of providing healthcare workers PPE. We strongly encourage institutions to work with health care providers to develop appropriate procedures for the safe cleaning and storage of reusable PPE within the institution.

We encourage all anesthesiologists, in this time of critical need, to support each other and all healthcare providers to ensure maximum protection to front line personnel in this time of need.

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President

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