



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



COVID-19 Ethics Analysis: What is the Ethical Duty of Health-Care Workers to Provide Care During the COVID-19 Pandemic? Primary Care Summary

This is a summary of key recommendations for family physicians and nurse practitioners (primary care providers) from the [COVID-19 Ethics Analysis: What is the Ethical Duty of Health-Care Workers to Provide Care During the COVID-19 Pandemic \(January 15, 2021\)](#); and 2. Practical implications. Refer to the [full source document](#) for the complete ethical analysis including recommendations for health-care workers, health authorities and the provincial government.

Key Recommendations

Ethical considerations:

- Primary care providers have an ethical duty to provide care and it is recognized that in their routine practice they assume exposing themselves to some degree of risk.
- Each primary care provider should determine and justify their obligation and willingness to provide care in contexts where they are exposed to risk of COVID-19 infection based on:
 - Their participation in a *specific* patient care activity that poses risk, and
 - Their own unique personal circumstances, experiences and identities.
- The duty to care described here is only discharged when circumstances **in the workplace** are such that the risks are certain, significant and unmitigable (e.g., working in COVID-19 positive units without adequate PPE). A primary care provider's personal circumstances, including their personal health status and responsibilities **outside the workplace** (e.g., childcare, pet caregiving, etc.), are not relevant factors in discharging a duty of care. Such personal circumstances should be addressed through accessing labour and employment benefits and/or any related labour and employment agreements,¹ as are available to the primary care provider.

Primary care responsibilities:

- While virtual care is an important modality of care, the appropriate use of virtual care **includes access to in-person care**. Primary care providers must ensure they are providing the appropriate balance of in-person and virtual care to meet the medical needs of patients seeking care while also avoiding unnecessary delays to health promotion, prevention and treatment services.²
- If it becomes apparent during a virtual care visit that a patient requires a physical exam, the primary care provider must either schedule an in-person visit or have pre-arranged procedures with a team who would assume the component of in-person care that the provider is unable to give, in a timely manner, to ensure the physical exam is not delayed.



Practical Implications

Context: Return to in-person primary care services

- In November 2020, the PHO reiterated that physicians and medical specialists practicing in community settings should be providing a blend of virtual and in-person care that meets the medical needs of the patient seeking care while avoiding unnecessary delays.
- Given the high rate of COVID-19 immunization in B.C., in-person primary care services can safely continue, with infection prevention control measures and WorkSafeBC communicable disease prevention plans in place.
- The B.C. government announced the move to [Step 3](#) of B.C.'s Restart Plan as of July 1, 2021. As a result, B.C. is in the process of shifting from active COVID-19 emergency response to ongoing planning and management of endemic communicable diseases.

Office precautions

- Using diligent [infection prevention control measures](#) helps create a safe environment for practitioners and patients.
- Patients who answer “yes” to any questions on a pre-visit COVID-19 screening questionnaire, including respiratory symptoms, should be referred for testing and can still be seen in-person with appropriate precautions for this situation.
- Current evidence suggests that the variants of concern spread the same way as the original COVID-19 virus. Some variants can spread more easily, and others may make a COVID-19 infection more severe. Immunization and the [infection prevention and control \(IPC\) measures](#) help stop their spread and current information is available from the BCCDC website.³

Choosing the visit modality to ensure high quality, patient-centred care

- Primary care is easily accessible, day-to day-health-care services for patients. It is the first point of contact for health advice, prevention, promotion services and treatment. It is important to note that some patients require a physical exam and must be treated in-person (e.g., pap smear, chest auscultation, eye exam, rectal exam).
- It is unacceptable to defer an indicated physical examination because it cannot be performed virtually.⁴
- Virtual care should be used when appropriate for the patient’s circumstances, preferences and personal needs as part of longitudinal primary care.
- The primary care provider must use clinical judgment, consider the patient’s individual needs, and consider the practical circumstances to determine whether virtual care is the appropriate modality for the patient’s concern, and follow best practices and evidence for virtual care.⁵ It is a complement to in-person services and not a replacement. Most health concerns require one or more in-person assessments over the course of the patient journey.²
- Primary care providers should not provide virtual modalities of care unless there is an appropriate pre-arranged source of **physical exams** (e.g., a team member, colleague or system arrangement) and **continuity of care** (e.g., rapid report back to the referring physician) for their patients. This pre-arranged source of care must be appropriate to the nature of the medical condition and temporally appropriate. A primary care provider has a professional and ethical duty to ensure their patients can be seen in person by them or other practitioners if needed and in a timely manner.



- Primary care providers transferring part of their normal responsibilities to a team member need to ensure timely communication with enough information to ensure that there is no interruption of care. Sending the patient to the emergency department is not an appropriate substitute.

Primary Care Provider Resources

- This ethical analysis should be read in concert with codes of ethics set out by regulatory bodies. Primary Care providers have a legal obligation to follow their **regulatory code of ethics**:
 - [College of Physicians and Surgeons of BC](#)
 - [BC College of Nurses and Midwives](#)
- **College of Physicians and Surgeons:** [Practice Standard: Virtual Care](#)
- **Doctors Technology Office:** [Getting Patients Back to Practice](#)
- **Canadian Medical Association:** [Virtual Care Playbook for Canadian Physicians](#)
- **Canadian Medical Protective Association** *Perspectives*, March 2021
 - [You have medico-legal questions about deferring care during the pandemic – The CMPA has answers](#)
 - [Safe care amid the pandemic – virtually and in person](#)
- **Canadian Nurses Protective Society:** [Twelve things to consider before joining a virtual practice](#)

References

Refer to the source document [COVID-19 Ethics Analysis: What is the Ethical Duty of Health-Care Workers to Provide Care During the COVID-19 Pandemic \(January 15, 2021\)](#) for the complete list of references.

1. BC Centre for Disease Control and BC Ministry of Health. COVID-19 Ethics Analysis: What is the Ethical Duty of Health-Care Workers to Provide Care During the COVID-19 Pandemic? [Internet]. BC Centre for Disease Control; 2021. Available from: http://www.bccdc.ca/Health-Professionals-Site/Documents/Duty_to_Care.pdf
2. Dr. Bonnie Henry. Letter to Physicians: Important COVID-19 update from the PHO re: patient care in community settings and access to PPE. Office of the PHO, Ministry of Health; 2020.
3. BC Centre for Disease Control. COVID-19 Variants [Internet]. BCCDC. 2021 [cited 2021 Mar 30]. Available from: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/variants>
4. CPSBC. College of Physicians and Surgeons of British Columbia Practice Standard Virtual Care [Internet]. CPSBC; 2021. Available from: <https://www.cpsbc.ca/files/pdf/PSG-Virtual-Care.pdf>
5. Sept L, Kirkwood J, Korownyk CS. Virtual versus in-person primary care visits. *Can Fam Physician*. 2020 Dec;66(12):904.

