UNITY HEALTH TORONTO

Centre for Clinical Ethics

Building Bridges

2025/26 CENTRE FOR CLINICAL ETHICS COMMUNITY REPORT



Bridge Towards Reconciliation

I was recently reminded of the late Justice Murray Sinclair's message around the need to rebuild a sense of nationhood grounded in respect, understanding and mutual recognition.

One very small way the CCE tried to contribute to this was through our annual speaker series dedicated to Indigenous perspectives around end of life. We had a record 1400 attendees over three virtual sessions thanks to a fruitful collaboration with Roberta Pike (Director of Indigenous Wellness at Unity Health) and Diane Longboat (former elder at CAMH and the CEO of the Institute for the Study of Spirit). We put together three panel discussions and focused on the experiences of Indigenous patients in our healthcare system, the process of death and dying from Indigenous perspectives, and the importance of ceremony.

We hope this contributed to a better understanding of Indigenous ways of knowing and mutual respect.







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THIS YEAR WE BUILT BRIDGES

Thinking back on a year of accomplishments is always a rewarding part of putting together our annual community report. This is our 6th annual community report, and our goal is the same each year: to describe all the incredible work that goes on at the Centre, demonstrating our strength as a team, and our impact to those we support.

Our ethics programs continue to integrate into their respective institutions as evidenced by our activities this year. We performed 849 clinical consults, 121 organizational consults and 41 debriefs over the last fiscal year. We continue to offer a low barrier service with an ethicist on-call 24/7. This year we had 153 on-call requests.

The CCE ethics team continues to produce scholarship while maintaining busy clinical consult volumes. This year, we changed how we manage the fellowship program given all the demands of this role and staff changes. Dr. Jordan Wadden will lead fellow education while Dr. Sean Hillman will be responsible for the managing the day-to-day activities of the fellows. We believe that this structure will better support the fellows and look forward to giving you an update on that in next year's report.

Speaking of the fellowship program, we welcomed Andrew Tamale and Kirk Lougheed who joined Farid Shaikh in the fellowship program. We also wanted to congratulate Dr. Frank Curry for completing the fellowship program. For the next cohort, we had a record number of applicants and are thrilled to welcome Cara Evans and Estelle Alexander as fellows for 2026-2028. You can read more about these newest fellows in this report.

Our tradition of the CCE book club continued this year with a focus on supporting patient decision-making. We read Good Ethics and Bad Choices by Jennifer Blumenthal-Barby. The book examines the relevance of behavioural economics for medical ethics and the ethics of nudging. We enjoyed the book so much that we decided to dedicate our next speaker series to the topic and Jennifer Blumenthal-Barby will be joining as a speaker.

Another highlight of this year was our annual speaker series on Indigenous perspectives on end-of-life and no-CPR orders. We have more about that in this report.

I am so proud to work with a team with such diverse academic backgrounds who are focused on improving patient care through providing expert guidance on ethical decision-making across healthcare. I hope you enjoy this report, which represents a snapshot of what we did over the 2025-2026 fiscal year. Feel free to reach out to me if you have any questions or comments.





Michael Szego, PhD, MHSc

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849
CLINICAL CONSULTS

121
ORGANIZATIONAL CONSULTS

153
ON-CALL REQUESTS

Our 2023–2026 STRATEGIC PLAN CONTINUES TO GUIDE OUR WORK.

OUR PURPOSE

Provide expert, compassionate guidance in ethical decision-making

GUIDING PRINCIPLES

Human dignity:
Honouring the sacred value of each person

Inclusivity:
Learning from and seeking to practice in solidarity with those most affected by injustice

Partnership:
Building relationships with caregivers, communities, families, patients, healthcare providers, learners, leaders and volunteers

Trust:
Working to earn the confidence of those we serve

Leadership through collaboration:
Facilitating collective creativity in healthcare and bioethics

Our strategic directions.

1 Adapt our services to evolving healthcare realities to improve care

Work collaboratively with our partner organizations to increasingly serve those who need care outside of an acute care setting

Enhance access to our services and adapt to support our partners' evolving strategies and plans

Continue to build relationships with organizations that focus on health care for underserved populations

Develop skills and competencies to address ethical implications of emerging technologies used in healthcare

2 Advance both bioethics scholarship and fellowship training

Increase our academic and scholarly output

Continue to improve the structure and content of our fellowship program

Leverage fellowship program developments to improve our practice

3 Practice and promote principles of equity, diversity, and inclusion (EDI) in healthcare

Explore and strengthen the CCE's relationships with EDI initiatives within our healthcare environments and with equity-seeking communities

Review and enhance the integration of EDI considerations throughout the fellowship program, including teaching, learning, and fellow experiences

Review the CCE's past/current practices as related to EDI to identify strengths, gaps, and opportunities

Develop a shared team commitment to integrating EDI principles throughout everything we do

BUILDING BRIDGES TO INDIGENOUS PERSPECTIVES

Each year our Speaker Series seeks to inform and raise awareness of important issues facing our health system, our 2026 series was no exception.

The CCE was guided by Unity Health's Office of Indigenous Wellness, Reconciliation and Partnerships Director, Roberta Pike and Elder and CEO of The Institute for the Study of Spirit, Diane Longboat, to develop the series, "End of Life and no-CPR Orders: Indigenous Perspectives". This series explored the experiences of Indigenous patients in hospital settings, specifically examining systemic racism, historical trauma, end-of-life care, and no-CPR orders.

With over 500 participants from Canada and the US attending the first of three sessions, there was clearly a desire to learn more about the practices that support these communities. Speakers shared insights into why a substitute decision maker may not always be a family member, how Indigenous people view death and dying and how ceremonies are important for those leaving the world and those staying.

In preparing to host this series, a spotlight was given to Indigenous health and community leaders who address these issues everyday. They shared their perspectives on how the needs of Indigenous people differ from other populations and the differences in practices between various Indigenous communities and Nations.

"People wanted to know what is different for Indigenous people, understanding that we were giving a broad perspective on death and dying," said Robert Pike.

One of the practices presenters spoke about was a smudging ceremony. The ceremony includes burning sacred medicines to cleanse those present. It helps to bring peace and calm. In a hospital setting with smoke detectors and security, this can be a challenge.



This series attracted the greatest number of participants with just over 1400 attendees over the three sessions.

Roberta and her team have worked with Unity Health to ensure there are protocols in place to support these ceremonies, without interruption and stress, for those who need it. These practices are still relatively new and Roberta notes, "We want to see that these ceremonies become second nature in the hospital. In 20 years, I'd like to see our people participating in these ceremonies without barriers."

While there are many resources available online and within healthcare organizations to learn more about indigenous health, Roberta reminded us that, "It is everyone's responsibility to learn how to provide great care to Indigenous people." She believes that the CCE series was a good bridge to learning and helped to build stronger bonds with the ethics team and greater awareness with those who attended the series.

We invite you to continue your own learning and access the series here.

WHAT THEY SAID:

"I work in the medical field where people often are judgemental about decisions. And reminding people that it is not our decision on how someone chooses to live or die is a big part of the role. I wish more people were aware of that." ***- Participant feedback***

"Wonderful session. So rich with knowledge, wisdom, strength and humanity."
- Participant feedback

Welcoming Our New Fellows

THIS YEAR WE WELCOMED TWO NEW FELLOWS TO OUR PROGRAM

FORGING A NEW FUTURE WHILE DRAWING FROM HER PAST CAREER

Cara Evans joined the 2026 Fellowship program in September.

She brings her academic expertise from her PhD in Health Policy at McMaster University and professional experiences as an occupational therapist in youth mental health at St. Joseph's Healthcare Hamilton and as Manager of Knowledge Mobilization at Waypoint Centre for Mental Health Care.



CARA EVANS

Her most recent role at Waypoint focused on using research evidence to inform system-level decisions, while her earlier work centred on direct care delivery. The fellowship gives her an opportunity to bring these two areas of experience together.

"My goal in undertaking this fellowship is to build the skills and knowledge needed to practise as a clinical and organizational ethicist. I hope to develop an approach that is attentive to how health systems and social structures shape people's experiences of health and care, both in bedside consultations and in organizational policy review."

Cara wants to help address both structural and everyday health system issues while providing meaningful support to patients and their families. Through shadowing, listening, and learning, Cara intends to hone her skills as an ethicist. She is especially drawn to the team's commitment to serving marginalized and equity-deserving populations. She is eager to work with her colleagues, learn from their experiences, strengthen her own skills, and better understand how ethicists build relationships with the organizations they serve.

CCE ethicists come from many disciplines, including law, philosophy, science, and religion. Cara is among those who have direct front-line care experience. She says that background has prepared her "to meet people in those moments of distress."

OH, THE THINGS SHE'S SEEN AND THINGS SHE'LL DO

"I had to sit down. I had to ask my boyfriend to read the email. I couldn't believe that I was going to get my dream job," Estelle Alexander exclaimed, when she found out that she had been selected for the 2026 CCE Fellowship.



ESTELLE ALEXANDER

Estelle began her undergrad at Dalhousie University in Nova Scotia during the first year of COVID. Being from Ontario, she had to return home. Once back in Ontario, she worked as a Personal Support Worker in a nursing home until it was time to return to school. She saw first-hand the impact of the pandemic on seniors. "It was awful. People were dying every day," said Estelle. This triggered questions of ethics and bioethics for her. The seed was planted.

When she eventually returned to school, she decided to switch from nursing to complete her undergrad in public health earning her Bachelor of Science in Health Promotion with a minor in Medical Humanities. When others were taking "bird courses for electives" as she describes it, she was taking ethics courses. The seed was growing.

She continued to have a keen interest in the intersections of law, ethics and healthcare. This led her to complete her LLM in Medical Law and Bioethics, from the University of Edinburgh. And now the roots were set. Estelle has a background in health policy and advocacy, most recently at Heart & Stroke in Canada.

Through her work there, she has seen how policy and advocacy can drive meaningful improvements in health outcomes, reinforcing her commitment to creating positive change within Canada's health systems.







She matches her academic drive and professional interests with her passion for social change as a community advocate. She is the volunteer Policy Director at the Young Canadians Roundtable on Health which is a unified voice for Canadian youth to advocate for improvements in child and youth health and wellbeing, working alongside policymakers, healthcare practitioners, and government.

Her passion and volunteer time also extends to the National Council of Youth in Care Advocates. Their work is centred on ensuring that youth in and from care are afforded equitable supports and conditions for success, so they may thrive and not only struggle to survive. She received financial support from Dalhousie's tuition waiver program for students with lived experience in the child protection system to pursue her higher education after high school.

In taking her next step into the Fellowship, her goal is to, "Make ethics more well-known. Make it more of a presence in Canada." She wants to ensure more ethicists have a seat at the right tables and she is not afraid "to move tables to create a better system for everyone."

"I want to do something that gets me excited in the morning. I want to look back on my life and say that I have helped others, and I can be proud of what I have done," she says.

EVERYTHING OLD IS NEW AGAIN

For thousands of years, humans have discussed ethics, repeatedly questioning morality and what it means to make decisions for one person that may affect others.

"Today, scientific innovations gave rise to new moral conundrums. As technology evolves, new moral and ethical puzzles develop," says Dave Langlois, clinical ethicist at the Centre for Clinical Ethics.

This evolution has caused him and his colleagues to rethink the Medical Genomics course they teach at the University of Toronto. While the course has been active since 2018, Dave and his colleague Ashwini Premashankar, Teaching Assistant and PhD candidate in Molecular Genetics at the University of Toronto along with Michael Szego, Senior Director of the CCE, course director and Assistant Professor, at U of T, have been iterating the course materials to better meet the needs of the students it serves.

"The course attracts quite a diverse set of students from fields such as bioinformatics, public health, genetic counselling, so we can't focus on just one aspect of medical genomics," says Ashwini. She explains that the teaching focuses on how medical genomics may impact decision-making and policy decisions that students may face in their future careers. "There are few programs that focus on this type of thinking and very few programs at the graduate level that teach about genomics and bioethics," says Ashwini.

This year the team received a small grant to be able to ask interest holders: what ought to be taught in a course like this? They have been getting perspectives from former students, groups representing patients with rare diseases, researchers at the intersection of equity and genomics. Past students were encouraged to discuss their ideas and opinions, though Ashwini notes, "this can be very uncomfortable and confrontational for some as some of the topics can challenge their own values."

Dave says one of the course's key benefits is that it connects today's ethical questions with more than 3,000 years of ethical discourse, weaving new debates into conversations that have continued for millennia.



"The class is an opportunity for new minds to have deep, rich conversations on ethics so that they genuinely feel better able to deal with the challenges they may face in their careers," says Dave.

Preliminary data was presented in June at the European Society of Human Genetic conference and once the data has been analyzed the course will be re-designed to reflect the input we have received. And for those not able to take the course, the team is working on making a free podcast available based on the course content in 2027.

Our Team



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Centre for Clinical Ethics



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Clinical Ethics Fellow



Cara Evans, PhD
Clinical Ethics Fellow



Andrew Tamale, MBChB, MHE
Clinical Ethics Fellow



Lynda Sullivan,
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Centre for Clinical Ethics

Clinical Ethics Data

We work with a variety of clinical and administrative leaders to provide ethical services to patients, families and staff. Social Workers, Physicians, Unit Managers and Discharge Planners initiate the most ethics consults across all our partner sites.

ACTIVITY	2025 - 2026	2024 - 2025	2023- 2024
Clinical Consultations	849	943	885
Debriefs	41	32	54
Organizational Consults	121	147	95

TOP ETHICAL ISSUES

By far, the largest volume of requests come from issues related to substitute decision-making, discharge planning and concerns related to patient rights.

- **Issues related to substitute decision making**
- **Issues with discharge planning**
- **Concern raised about patient's rights**
- **Concerns about the appropriateness of a patient's treatment plan**

CONSULT REQUESTOR

- SOCIAL WORKER | 307
- MD OR NP | 207
- MANAGEMENT | 166
- OTHER PROFESSIONAL STAFF | 45
- TRANSITION PLANNER | 6
- RN | 16
- PATIENT OR FAMILY | 17
- EDUCATOR | 1
- OTHER | 84
- # ON-CALL REQUESTS | 153

PUBLICATIONS

- Bianchi, A., et al., "PEARLS of Wisdom: A Standardized Approach to Debriefing for CEFPs." *The American Journal of Bioethics*. 2025. 25(10), 89–92. https://doi.org/10.1080/15265161.2025.2543731
- Cheerie D, et al. Screening rare genetic diagnoses for amenability to bespoke antisense oligonucleotide therapy development: A retrospective cohort study. Genet Med. 2025 Oct 11;28(1):101597.
- Saso-Baudaux, G., Henry, A., Gaer, I., Anderson, J., Barned, C., Bell, J. A., Buchman, D., de Bie, L. ... & Racine, E. (2026). Understanding What Clinical Ethical Cases Are: A Review and Perspectives from a Canadian Collaborative Working Group. *Canadian Journal of Bioethics*, 9(2), 104-117.
- Smith MJ, Mackie E. Do vaccine mandates impair the voluntariness of informed consent? *Journal of Medical Ethics* 2026;**52**:215-219. https://doi.org/10.1136/jme-2025-110950
- Smith MJ, Mackie E. Informed consent when vaccination is mandatory: response to commentaries. *Journal of Medical Ethics* 2026;**52**:229-230. https://doi.org/10.1136/jme-2026-111857

PRESENTATIONS

- de Bie, L. (April 2025). Creating more equitable health systems through alternative approaches to ethics at the intersection of disability, mental health, and neurodiversity. *Echoes of the past: Traversing inequities in health ethics*, Annual Ethics Conference, Providence Health Care, Vancouver.
- de Bie, L. (October 2025). Enacting Ontario's Health Care Consent Act in 2025: *Practical challenges in healthcare organizations.* Centre for Health Economics and Policy Analysis, McMaster University, Hamilton.
- de Bie, L. (October 2025). *Influencing the ethical culture of a complex health network: Use of an organizational ethics framework*. Health Policy 711 PhD seminar, McMaster University, Hamilton.
- de Bie, L. (May 2025). Teaching healthcare professionals to recognize and address ableism in everyday ethical decision-making. *Nordic Network on Disability Research Conference,* Helsinki.
- de Bie, L. (April 2025). Creating more equitable health systems through alternative approaches to ethics at the intersection of disability, mental health, and neurodiversity. *Echoes of the past: Traversing inequities in health ethics,* Annual Ethics Conference, Providence Health Care, Vancouver.
- de Bie, L. (October 2025). *Enacting Ontario's Health Care Consent Act in 2025: Practical challenges in healthcare organizations*. Centre for Health Economics and Policy Analysis, McMaster University, Hamilton.
- de Bie, L. (October 2025). *Influencing the ethical culture of a complex health network: Use of an organizational ethics framework*. Health Policy 711 PhD seminar, McMaster University, Hamilton.
- de Bie, L. (March 2026). *Fostering an ethical organizational culture: 4 core texts*. Guest lecture for 4G03 Ethics in Social Work, McMaster University, virtual.
- Farid, M. S. (2026). "Moral Uncertainty, the Dead Donor Rule, and Brain-Death Criteria in Islamic and Catholic Bioethics." Oral presentation at the Society for Christian Bioethicists Annual Conference, February 20–22, 2026.
- Farid, M.S. Ethically Navigating Islamic Beliefs, Family Roles, and Western Models of Palliative Care; Unity Health Ethics Grand Rounds; September 26, 2025
- Hillman, S. Language in Ethics & Clinical Consultations; Unity Health Ethics Grand Rounds; July 11, 2025
- Szego MJ, Scherer S. & Anderson J. (2025) Parent perspectives on whole genome sequencing for Autism Spectrum Disorder. European Society of Human Genetics Annual Conference. Milan, Italy, May 24-27, 2025
- Szego, M., Friedrich, J. Navigating the new CPSO policy on end of life and substitute decision making in the Intensive Care Unit: Lessons from a recent Consent and Capacity Board hearing; Unity Health Ethics Grand Rounds; April 25, 2025
- Wadden, JJ. Artificial Intelligence and Patient Consent: Is Consent Really Possible? Unity Health Ethics Grand Rounds; May 29, 2025
- Wadden, J.J. Ethical Considerations for Using Artificial Intelligence in Qualitative Research. AI for Qualitative Research Workshop, hosted by the Data Sciences Institute at the University of Toronto. November 20, 2025.
- Wadden, J.J. Naming and Diffusing the *Understanding Objection* in Healthcare Artificial Intelligence. Ontario Shores Centre for Mental Health Sciences Grand Rounds. November 11, 2025.
- Wadden, J.J. Use in Case of Emergency: An Ethics Framework for AI-Enabled Prehospital Emergency Support Systems. 4th International Conference on Ethics of Artificial Intelligence (4ICEAI) at the Universidade do Porto, Portugal. July 26-30, 2025.
- Wadden, J.J. Naming and Diffusing the *Understanding Objection* in Healthcare Artificial Intelligence. Canadian Bioethics Society and Canadian Journal of Bioethics Joint Virtual Short Snappers Event. May 30, 2025.
- Williams, C., Schwartz, S., Huynh, J., Maurice, R., & de Bie, L. (November 2025). *Moral reasoning and ethical decision-making integration session*. Professional Competencies, Undergraduate Medical Education, McMaster University, virtual.

For more information or to contact us please either email us or visit our website.

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