

Providing CPR or Rescue Breathing During a Pandemic: Ethical Considerations for Shelter Workers and Volunteers

Note: The circumstances surrounding the COVID-19 pandemic are changing rapidly. The ethical considerations outlined in this document are intended to support decision-making in response, but **the latest information and guidance can be found at ahs.ca/covid**

The information in this document is provided to assist first aid providers in considering the ethical implications of complex questions, and should not in any way be construed as legal or medical advice. **Different guidance applies for healthcare professionals** – this can be found at ahs.ca/covid.

For support in working through difficult ethical issues in healthcare, including those related to COVID-19, please contact the <u>AHS Clinical Ethics Service</u> at 1-855-943-2821 or <u>clinicalethics@ahs.ca</u>.

Introduction

During a pandemic, how should you as a first-aid provider decide whether to provide rescue breathing and/or cardiopulmonary resuscitation (CPR) to an unresponsive person who may be infected? What sorts of things should you consider? Thinking about such questions in advance can help you make sound ethical decisions in an emergency situation. This document aims to provide ethical guidance to staff and volunteers of shelters in the community, and it may also be useful to anyone who has first-aid training but is not a healthcare professional.

Background

- COVID-19 is spread through tiny droplets of liquid produced by people who have the virus mainly by coughing, sneezing, talking, laughing or singing. You can be exposed by breathing in these droplets or by touching surfaces they have landed on, then touching your face.
- It is likely that you will not know whether or not a person has COVID-19, so you should wear recommended personal protective equipment (PPE) when performing CPR and/or rescue breathing. Refer to https://www.ahs.ca/topics/Page17091.aspx for the latest guidance on recommended precautions.
- If you provide CPR and/or rescue breathing without appropriate PPE to a person who tests positive for COVID-19, you will be subject to a period of mandatory self-isolation afterwards (even if you do not develop symptoms).
- It is up to you to decide if you are willing to accept the risk of infection that comes with performing CPR and/or rescue breaths, but you should still call 911 either way. (911 might direct you to initiate CPR and/or rescue breaths, but it is still up to you to decide whether to perform them or not.)

Ethical Considerations for Providing CPR and/or Rescue Breathing

As always, you should base your decision on whether to commence CPR and/or rescue breathing on your training, your assessment of the situation, and site-based policies and procedures. However, during the pandemic, there is an elevated level of risk to you from providing CPR and/or rescue breathing. In making your decision, it may be helpful to ask yourself the following questions:

1. Do the expected benefits justify the risks?

- What are the expected benefits of you providing CPR and/or rescue breathing to this unresponsive person? (The expected benefits will be lower the longer they have been unresponsive prior to start of CPR and/or rescue breathing.)
- What are the risks involved, and how can they be managed? (How common or rare is COVID-19 in your area at present? What PPE is available? Is there a treatment or a vaccine yet? Can you limit the number of people nearby who might be exposed during the procedure? Are you at a higher risk of developing serious illness due to your age or pre-existing medical conditions?)
- Once you have done everything you can to manage/limit the risks of providing CPR and/or rescue breathing, are the potential benefits (to the unresponsive person) greater than the remaining potential risks (to yourself and others)?

2. Am I willing to assume the risks to myself and others around me?

- What is your personal risk tolerance? (How much risk to yourself are you willing to take on in order to help another?)
- What would be the impacts on yourself and others if you end up having to self-isolate after providing CPR and/or rescue breathing? (E.g. impacts on your ability to work, impacts on service delivery to other clients, impacts on others who live with you.)

3. Does my decision treat people fairly?

• The decision on whether or not to provide CPR and/or rescue breathing **should not be based** on irrelevant factors such as the unresponsive person's socioeconomic status, identity, or behaviours.

Additional Guidance Resources

- Shelter Guidance: Preventing, Controlling and Managing COVID-19 (ahs.ca/covid)
- Opioid Poisoning Response and COVID-19 (ahs.ca/covid)
- Harm Reduction and COVID-19: Guidance Document for Community Service Providers (ahs.ca/covid)
- Supporting people who use substances in shelter settings during the COVID-19 pandemic (crism.ca)
- First aid protocols for an unresponsive person during COVID-19 (redcross.ca)
- Modification to Public Hands-Only CPR during the COVID-19 pandemic (heartandstroke.ca)