

A Primer on Accountability for Reasonableness (A4R)¹ for Lakeridge Health

What is the A4R framework for?

Priority setting and resource allocation in healthcare poses an enduring challenge. In a context where resources are generally limited, we must attempt to balance a wide range of interests with the knowledge that some needs of some people will not be met. When stakeholders disagree about which interests or values are most important, it may not be clear how to reach a fair decision.

The *accountability for reasonableness* framework offers guidelines for a fair process when making priority-setting decisions in healthcare. The A4R framework does not tell decision-makers what is most important or what they should prioritize. Instead, it is a framework to ensure that decisions about what to prioritize are reached in a fair and mutually justifiable way.

What does the A4R framework do?

In one of the original articles giving rise to the A4R framework, Norman Daniels writes: “In the absence of consensus on principles, a fair process allows us to agree on what is legitimate and fair. Key elements of fair process will involve transparency about the grounds for decisions; appeals to rationales that all can accept as relevant to meeting health needs fairly; and procedures for revising decisions in light of challenges to them. Together these elements assure ‘accountability for reasonableness.’”²

On this basis, the A4R framework is generally understood to include three core principles:

- *Transparency*: decisions and their rationales should be readily accessible to all parties affected by the decisions
- *Relevance*: decisions must be based on reasons and principles that all well-meaning parties can agree are relevant to the context (e.g., protecting patient autonomy, ensuring organizational sustainability, promoting patient safety)
- *Revision*: the decision-making process must provide the opportunity to revise and revisit past decisions on the basis of new information, evidence, or input from further stakeholders

An additional (fourth) principle is often added to highlight the importance of leadership accountability and ongoing enforcement:

- *Leadership*: the process must include an ongoing mechanism for ensuring that the prior three principles are consistently met

How can the A4R framework be implemented at Lakeridge Health?

Embedding the A4R framework in an institution’s priority setting requires some structural work. The A4R framework must be tailored to the specifics of the institution’s circumstances: the institution’s mission, values, and abilities; the institution’s stakeholders; how authority and responsibility are distributed within the institution; the various forums for decision-making available in the institution; and so forth. Implementing the A4R framework would require the work of a dedicated team with institutional support.

¹ Adapted from material developed by Dr. David Langlois for the Centre for Clinical Ethics.

² Daniels, Norman. “Accountability for reasonableness.” *BMJ* 2000;321: 1300-1301.

It is worth highlighting that the A4R framework would not be a replacement for Lakeridge Health's principle-based ethical decision-making framework (YODA – You Observe Deliberate Act). The YODA framework offers more general ethical guidelines for all forms of ethical decision-making by both clinical and non-clinical staff. The 4AR framework, however, is aimed at assisting in a narrower range of circumstances: those focused on priority setting and resource allocation.

In fact, a developed A4R framework would be an example of the YODA framework in action. The *Observe* step of the YODA framework is the process-point at which decision-makers should investigate and gather the relevant considerations and values. The *Deliberate* step is the point at which decision-makers would weigh competing interests and needs, with an aim toward reaching a decision acceptable to all parties. The *Act* step of the YODA framework is the point at which those decisions (and their rationales) would be carried out, made transparent to stakeholders, and held up for potential revision in the future.