

NURS 425: PART 3
SOCIAL, LEGAL , ETHICAL AND CULTURAL
CONTEXT OF DECISION MAKING

Learning objectives:

After completing this unit, students are expected to be able to:

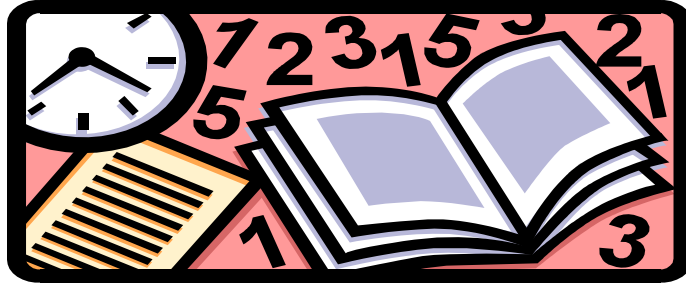
- Discuss the social, legal, ethical, and cultural context of decision making
- Develop basis for making ethical decisions
- Communicate the importance of patient's bill of rights
- Explain the concepts of autonomy, beneficence, veracity
- Apply the ethical principles embodied in the Nurses' code of ethics by ICN (2012) and Nursing Code of Ethics – Saudi Arabia (2011).

ETHICS

A set of rules and values that define right and wrong conduct.

They indicate when behavior is acceptable and when it is unacceptable.





MORAL PRINCIPLES

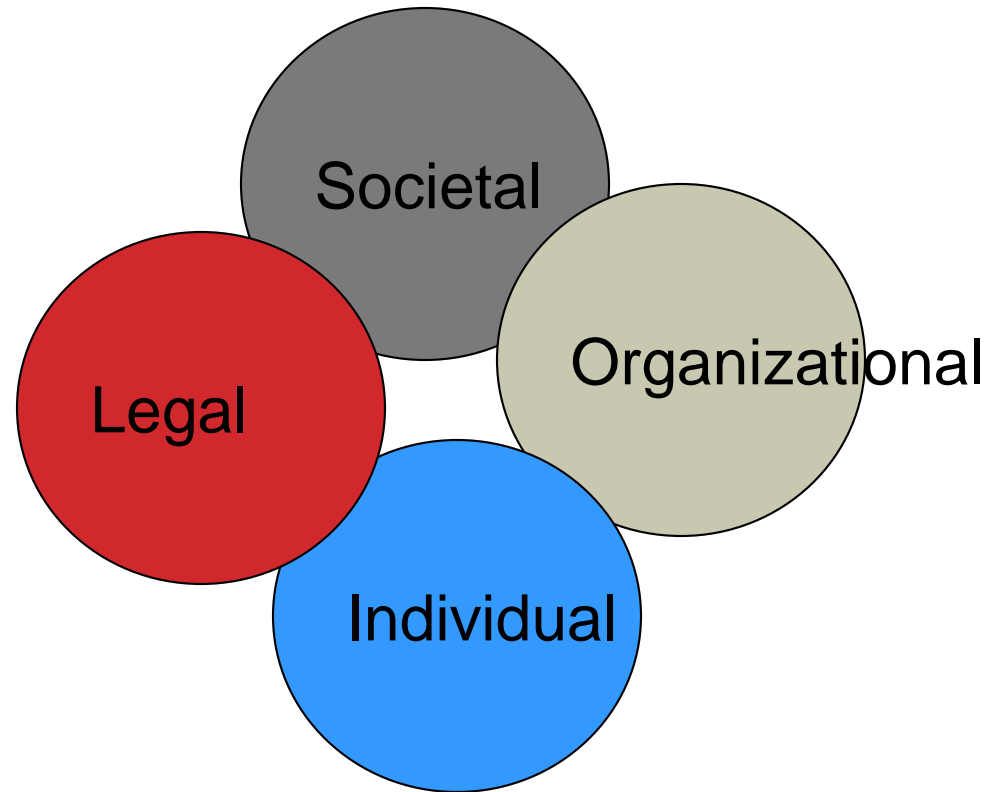
Moral principles prescribe rules of acceptable behavior that are intended to be impartial.

ETHICAL VS. UNETHICAL DECISIONS

Ethical decision – reasonable and acceptable because it aids stakeholders, organization, and society.

Unethical decision- decision that a manager would prefer to disguise or hide from other people because of individual gain is placed above others needs.

ETHICAL PERSPECTIVES FOR EVALUATING BEHAVIOR



SOCIETAL PERSPECTIVE

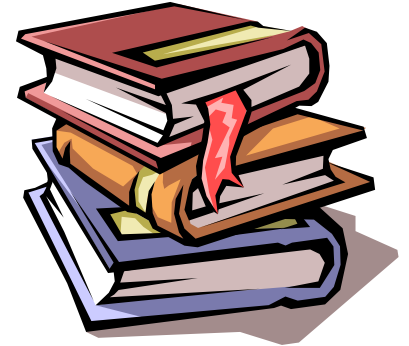
Societal Ethics – standards that govern how members of a society are to deal with each other on issues of fairness, justice, poverty, and individual rights.

The idea of what is ethical behavior is largely influenced by the society in which the behavior occurs.

Various public opinion surveys suggest a growing disenchantment with the lack of ethical behavior



LEGAL PERSPECTIVE



Laws: society's values and standards that are enforceable in the courts.

Employment-at-will: a traditional common-law concept holding that employers are free to discharge employees for any reason at any time and that employees are free to quit their jobs for any reason at any time.

LEGAL PERSPECTIVE

(CONTD.)

Ethics are not laws by any means, simply beliefs about what is right or wrong.

Legality of actions and decisions doesn't make them ethical

Laws move with the current culture and moral principles

- Lag behind because they are written and set
- Do not ensure or even promote ethical behavior

Often laws and ethics are in conflict

ORGANIZATIONAL PERSPECTIVE

To provide guidance for employees, an organization can define ethical and unethical behaviors.

Organizations can also guide employee actions both formally and informally.

INDIVIDUAL PERSPECTIVE

Despite prevalent societal, legal, and organizational interpretations of what is ethical, individuals have their own values and a sense of what is right or wrong.

Lawrence Kohlberg

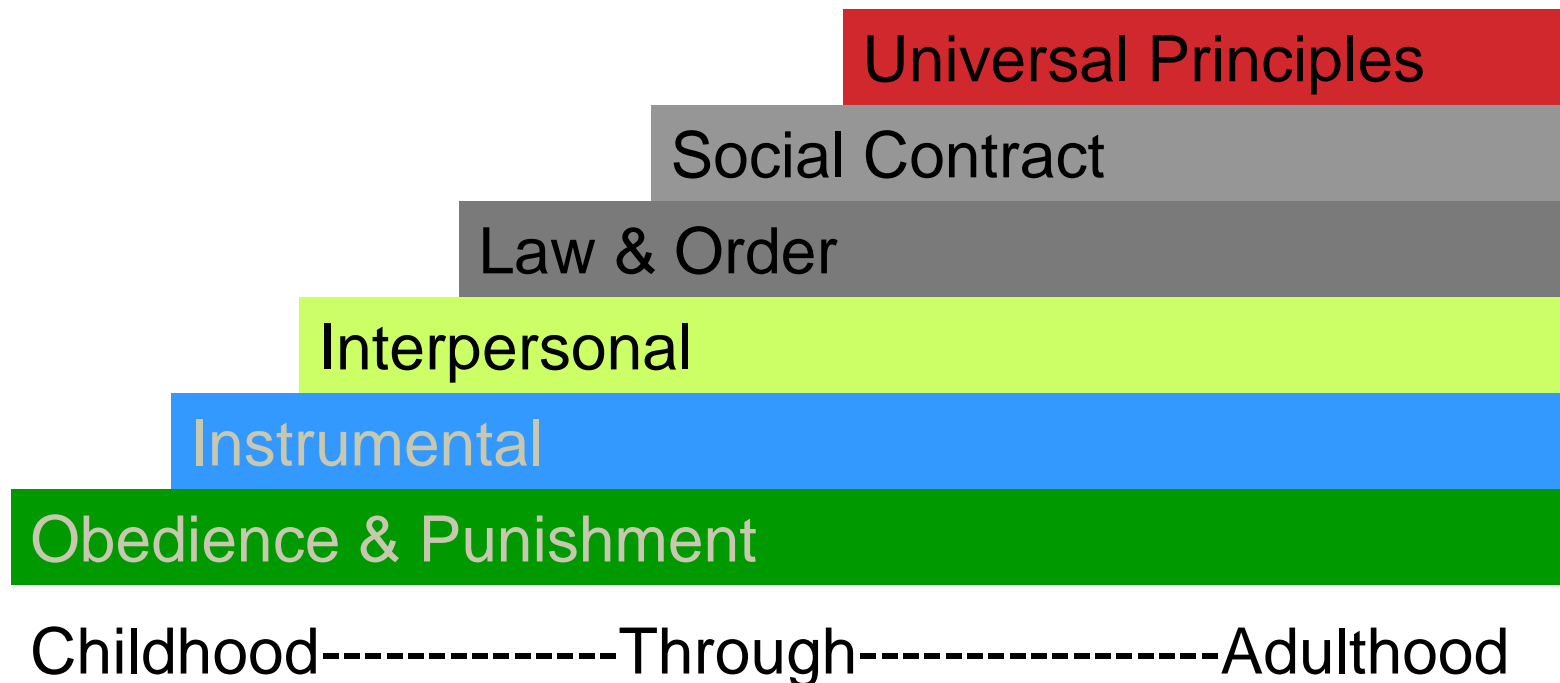
- Suggested people develop morally, much as they do physically, from early childhood to adulthood.
- As they develop, their ethical criteria and patterns of moral reasoning go through **stages of moral development**

INDIVIDUAL PERSPECTIVE (CONTD.)

Stages of moral development: according to Kohlberg, people develop morally by going through six stages of moral development: obedience and punishment, instrumental, interpersonal, law and order, social contract, and universal principles.



KOHLBERG'S STAGES OF MORAL DEVELOPMENT



KOHLBERG'S STAGES

(CTD.)

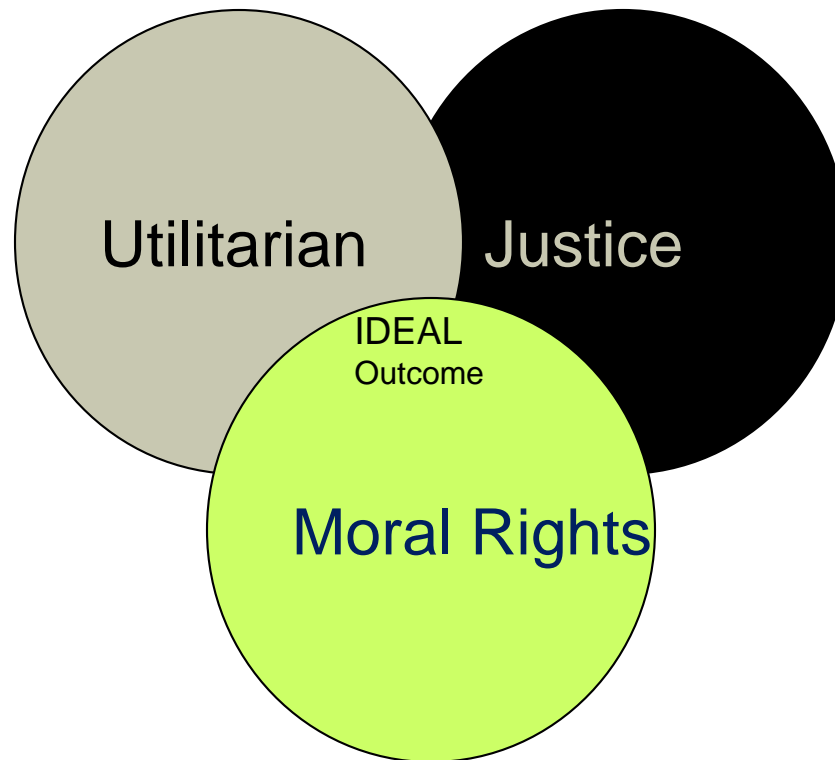
1. Obedience and punishment: person does the right thing mainly to avoid punishment or to obtain approval.
2. Instrumental: person becomes aware that others also have needs and begins to defer to them to get what the individual wants.
3. Interpersonal: person considers appropriate behavior as what pleases, helps, or is approved by friends or family.



KOHLBERG'S STAGES (CTD.)

4. Law & Order: person recognizes that ethical behavior is not determined only by reference to friends, family, co-workers, or others whose opinions the individual might value.
5. Social Contract: person is aware that people hold a variety of conflicting personal views that go beyond the letter of the law.
6. Universal Principles: person views appropriate conduct as determined by a person's conscience, based on universal ethical principles.

ETHICAL MODELS



UTILITARIAN MODEL

Greatest good for the greatest number, but may hurt a few.

Milton Friedman is the best-known advocate of this approach.

All employees should strive to increase the company's profits.



PARTS TO UTILITARIAN MODEL

- *(Organizational Goals)*: focusing on maximizing profits. Profits are seen as the reward for satisfying customers.
- *(Efficiency)*: achieved by both minimizing inputs (e.g. labor, land, and capital) and maximizing productive outputs.
- *(Conflicts of Interest)*: by having a financial interest in a supplier a purchasing agent might be more likely to buy from his supplier even if it's not in the companies best interest.

MORAL RIGHTS MODEL

Judging decisions and behavior by their consistency with fundamental personal and group liberties and privileges.



(Life and Safety): Employees, customers, and public have the right not to have their lives and safety endangered.

(Truthfulness): They have the right not to be intentionally deceived on matters about which they should be informed.

(Privacy): Citizens have the right to control access to personal information.

MORAL RIGHTS MODEL (CONTD.)

(Free Speech): Employees have the right to criticize the ethics or legality of their employers actions.


(Private Property): This right allows people to acquire, use, and dispose of shelter and have life's basic necessities.

JUSTICE MODEL

(CONTD.)

Fairness

Principle: moral requirement that employees support the rules of the organization when certain conditions are met.



Natural Duty

Principle: moral requirement that decisions and behaviors be based on a variety of universal obligations.

How to make an ethical decision

Jameton's Model for resolving nursing ethics problems (1984)

1. Identify the problem	Nurse should clarify what is at issue: values, conflicts, matters of conscience
2. Gather additional information	Nurse should decide who the main decision maker is and what the clients or their surrogate decision makers want
3. Identify all options open to the decision maker.	All possible courses of action and their outcomes should be considered. The likelihood of whether future decisions might have to be made should be evaluated.
4. Think the situation through.	Consider the basic values and the professional obligations involved. Explore the ethical principles and relevant rules.
5. Make the decision	The decision maker should choose the course of action that reflects his or her best judgment.
6. Act and assess the decision and its outcomes	Nurse should compare the actual outcomes of the situation with the projected outcomes. Can the process of decision making be improved for further situations having similar characteristics? Can this decision be generalized to other client care situation? .library.armstrong.edu

How to manage an Ethical Conflict

- Discuss the client care situation with the following:
 - Another nurse
 - Nursing leadership
 - A representative from the Ethics Committee
 - The patient or the patient's family
 - The patient's physician
 - A religious counselor

Earliest known declaration of the right to health

- National Convention of the French revolution in 1793
 - There should be only one patient to a bed in hospitals and that hospital beds should be placed at least 3 feet apart

Patient's Rights:

- Basic extensions of basic human rights
 - Right to health
 - Right to health care
- Aided by consumer groups and health care providers
 - Right to informed consent
 - Right to refusal of treatment
 - Right to privacy

Right to Health

Universal Declaration of Human Rights of the United Nations Assemble (UNESCO, 1949)

- Right of all persons to a standard of living adequate to provide for health and well-being and the right to “food, clothing, housing, and medical care”
- Persons are entitled to certain services, programs, and goods to maintain or achieve health as a basic human right.

Right to Health Care

Defined as a 'positive right' to goods and services to maintain and improve whatever state of health.

A rights claim against the state or its agencies to provide specific health care services.

Examples: state sponsored immunization programs, kidney dialysis services, home health services, prenatal and family planning services

Patient's Bill of Rights (AHA, 1973)

Affirms the basic human rights of all clients who seek health care services to:

- Receive considerate and respectful care
- Obtain complete medical information
- Receive information necessary for giving informed consent
- Refuse treatment
- Request services
- Refuse participation in research projects
- Expect reasonable continuity of care
- Be informed of institutional regulations
- Have privacy
- Have personal information and medical records treated confidentially
- Be provided with information on other institutions and individuals related to care and treatment
- Examine and obtain explanations of financial charges

Professional Code of Ethics

- Statements encompassing rules that apply to persons in professional roles.

Professional Codes of Ethics for Nurses

- Specific applications of more universal moral principles.
- Prescribes moral behavior and actions based on moral principles in response to patients' rights (Fry, 1994)
- Professional nurse has a moral obligation to follow the rules in a code of ethics

Veracity

- Duty to tell the truth and not lie or deceive others
- Truthfulness is regarded as fundamental to the existence of trust among human beings
- Code of Nurses states that... “Clients have the moral right to be given accurate information, and all the information necessary for making informed judgments” (ANA, 1985).
- The duty not to lie is a stronger moral duty than the duty to disclose information.
- The duty of veracity correlates with the client’s right to know and includes a strong moral obligation not to lie or deceive.

Veracity: Arguments for

- Veracity is part of the respect that is owed other persons
 - **Example:** being truthful to clients regarding the nature of the care they are receiving
- The duty of veracity is derived from or is a way of expressing the duty of keeping promises
 - Communicating with the client creates an implicit contract to tell the truth and not lie or deceive.
- Relationships of trust are necessary for cooperation between clients and health care professionals
 - Nurse has responsibility to maintain truthful relationships with clients to protect and strengthen other health care relationships in general.

Confidentiality

- Principle of not revealing or divulging certain information and be treated as confidential
- Enables control of disclosure of personal information and limits the access of others to sensitive information (Fry, 1994)
- Privacy is recognized as a basic human right.
- Code for Nurses states that: “The nurse safeguards the client’s right to privacy by judiciously protecting information of a confidential nature” (ANA, 1985).
- Because of respect for persons, nurses respect clients’ rights to privacy by maintaining the moral rule of confidentiality.

Reasons for overriding the duty to observe confidentiality:

- When in conflict with other duties toward the client.
 - Ex: the duty to preserve life may outweigh the duty to respect confidential information concerning self-destructive wishes of the client.
- When in conflict with duties toward identified others.
 - Ex: A mental health client tells the nurse of intent to harm or kill another member of the community
- When in conflict with duties toward unidentified others or the rights and interests of society in general.
 - Ex: the law requires communicable diseases such as PTB or VD to be reported regardless of the confidential nature of that information
 - Health records used for epidemiological research without the clients' knowledge
 - Duty to increase or protect the health of the community through research outweighs the duty to respect the confidentiality of health records

Advocacy

- Nurse speaks for or in support of the best interests of the individual client or vulnerable client population not be harmed by providing health care services
- Code for Nurses states: “the nurse must be alert to and take appropriate action regarding any instances of incompetent, unethical, or illegal practice by any member of the health care team or the health care system, or any action on the part of others that places the rights or best interests of the client in jeopardy (ANA, 1985).

Accountability

- Being answerable to someone for what has been done in the nursing role
- Includes providing an explanation to oneself, the client, the employing agency, and the nursing profession for what one has done in the role of nurse
- An obligation that has both moral and legal components and implies a contractual agreement between two parties.

Accountability (contd)

- When a nurse enters into a contractual agreement to perform a service for a client, the nurse will be held answerable for performing this service according to agreed-upon terms, within an established time period, and with stipulated use of resources and performance standards.
- The nurse as contractor is responsible for the quality of the services rendered and is accountable to the individual client, the health service agency, the nursing profession, own conscience for what has been done (Fry, 1994).

Accountability (contd)

- The moral obligation of accountability corresponds to the client's right to an accepted level of competent nursing care and the right to self-determination in health care
- Directs the professional to act in a particular way according to moral norms (Fry, 1994)

Beneficence

- The obligation that healthcare professionals have to act in a way that is of benefit to those for whom they care.
- Principle invoking that 'we ought to do good and prevent or avoid doing harm' (Frankena, 1973).
- Duty to help others gain what is of benefit to them but does not carry the obligation to risk one's own welfare or interests in helping others.
- Nurses are only morally required to prevent harm

._ (Beauchamp, 2008; library.armstrong.edu)

Beneficence (contd)

- Rule of Utility
 - Moral duty to weigh and balance benefits against harms to increase benefits and reduce the occurrence of harms (Beauchamp & Childress, 1994)
- Cost-benefit analysis
 - Measures the harms and benefits of various health programs while figuring the costs of potential trade-offs in certain courses of actions
 - Ex: factors taken into consideration include lives saved, costs averted, taxes saved, illness prevented.
 - These are converted into common unit usually money, to measure the benefits and costs of alternative approaches to a problem

Autonomy

- Refers to the capacity to think, decide and act on one's own free initiative and it is the ultimate right of all individuals.
- Freedom of action that an individual chooses
- Principle states that persons who are autonomous are capable of choosing and acting on plans they themselves have selected.
- To respect persons as autonomous individuals is to acknowledge their personal rights to make choices and act accordingly (Fry, 1994)
- Application:
 - Respect for persons
 - Protection of privacy
 - Provision of informed consent
 - Information, comprehension, voluntariness
 - Freedom of choice, including treatment refusal
 - Protection of diminished autonomy

Justice

- Principle stating that 'equals should be treated equally and that those who are unequal should be treated differently according to their differences (Beauchamp & Childress, 1994).

Nursing Code of Ethics:

General Nursing Administration, MOH-KSA

Code of Ethics: a branch of philosophy dealing with standard of conduct and moral judgments

Purpose:

To provide basis for interpreting and analyzing clinical situations in decision making.

See pdf file.

THE ICN CODE OF ETHICS FOR NURSES

An international code of ethics for nurses was first adopted by the International Council of Nurses (ICN) in 1953. It has been revised and reaffirmed at various times since, most recently with this review and revision completed in 2012.

PREAMBLE

Nurses have four fundamental responsibilities: to promote health, to prevent illness, to restore health and to alleviate suffering. The need for nursing is universal.

Inherent in nursing is a respect for human rights, including cultural rights, the right to life and choice, to dignity and to be treated with respect. Nursing care is respectful of and unrestricted by considerations of age, colour, creed, culture, disability or illness, gender, sexual orientation, nationality, politics, race or social status.

Nurses render health services to the individual, the family and the community and coordinate their services with those of related groups.

Elements of the Code

1. Nurses and people

The nurse's primary professional responsibility is to people requiring nursing care.

In providing care, the nurse promotes an environment in which the human rights, values, customs and spiritual beliefs of the individual, family and community are respected.

The nurse ensures that the individual receives accurate, sufficient and timely information in a culturally appropriate manner on which to base consent for care and related treatment.

The nurse holds in confidence personal information and uses judgement in sharing this information.

The nurse shares with society the responsibility for initiating and supporting action to meet the health and social needs of the public, in particular those of vulnerable populations.

The nurse advocates for equity and social justice in resource allocation, access to health care and other social and economic services.

The nurse demonstrates professional values such as respectfulness, responsiveness, compassion, trustworthiness and integrity.

International Council of Nurses [ICN] (2012)

Elements of the Code (contd)

2. Nurses and practice

The nurse carries personal responsibility and accountability for nursing practice, and for maintaining competence by continual learning.

The nurse maintains a standard of personal health such that the ability to provide care is not compromised.

The nurse uses judgement regarding individual competence when accepting and delegating responsibility.

The nurse at all times maintains standards of personal conduct which reflect well on the profession and enhance its image and public confidence.

The nurse, in providing care, ensures that use of technology and scientific advances are compatible with the safety, dignity and rights of people.

The nurse strives to foster and maintain a practice culture promoting ethical behaviour and open dialogue.

Elements of the Code (contd)

3. Nurses and the profession

The nurse assumes the major role in determining and implementing acceptable standards of clinical nursing practice, management, research and education.

The nurse is active in developing a core of research-based professional knowledge that supports evidence-based practice.

The nurse is active in developing and sustaining a core of professional values.

The nurse, acting through the professional organisation, participates in creating a positive practice environment and maintaining safe, equitable social and economic working conditions in nursing.

The nurse practices to sustain and protect the natural environment and is aware of its consequences on health.

The nurse contributes to an ethical organisational environment and challenges unethical practices and settings.

Elements of the Code (contd)

4. Nurses and co-workers

The nurse sustains a collaborative and respectful relationship with co-workers in nursing and other fields.

The nurse takes appropriate action to safeguard individuals, families and communities when their health is endangered by a co-worker or any other person.

The nurse takes appropriate action to support and guide co-workers to advance ethical conduct.

NURSING ADMINISTRATION

ADMINISTRATIVE POLICY AND PROCEDURE				
ADD	POLICY NUMBER:	GNR-01-14	APPLIES TO:	NURSING
	TITLE:	NURSING CODE OF ETHICS		

1.0 DEFINITION

Code of Ethics is a branch of philosophy dealing with standard of conduct and moral judgments.

2.0 PURPOSE

To provide basis for interpreting and analyzing clinical situations in decision making.

3.0 POLICY

1. Nurses are obligated to provide ethical and legal patient care that demonstrate respect for other.
2. Nurses have four fundamental responsibilities: to promote health, to prevent illness, to restore health and to alleviate suffering. The need for nursing is universal.
3. Inherent in nursing is respect for human rights, including the right to life, dignity and to be treated with respect. Nursing care is unrestricted by considerations of age, color, creed, culture, disability or illness, gender, nationality, politics, race or social status.
4. Nurses render health services to the individual, the family and the community and co-ordinate their services with those of related groups.

NURSING ADMINISTRATION

ADMINISTRATIVE POLICY AND PROCEDURE

ADD	POLICY NUMBER:	GNR-01-14	APPLIES TO:	NURSING
	TITLE:	NURSING CODE OF ETHICS		

International Code of Ethics for Nurses:

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the name of health problems.
2. The Nurse's primary commitment is to the patient, whether an individual, family, group or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patients.
4. The nurse is responsible and accountable for individual nursing practice and determine the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

NURSING ADMINISTRATION

ADMINISTRATIVE POLICY AND PROCEDURE				
ADD	POLICY NUMBER:	GNR-01-14	APPLIES TO:	NURSING
	TITLE:	NURSING CODE OF ETHICS		

5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining and improving healthcare environment and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. A nurse treats clients with respect for their individual needs and values.
9. Based on respect for clients and regard for their right to control their own care, nursing care reflects respect for the right of choice held by clients.
10. The nurse holds confidential all information about a client learned in the healthcare setting.

NURSING ADMINISTRATION

ADMINISTRATIVE POLICY AND PROCEDURE				
ADD	POLICY NUMBER:	GNR-01-14	APPLIES TO:	NURSING
	TITLE:	NURSING CODE OF ETHICS		
<p>11. The nurse is guided by consideration for the dignity of clients.</p> <p>12. The nurse provides competent care to clients.</p> <p>13. The nurse maintains trust in nurses and nursing.</p> <p>14. The nurse recognition the contribution and expertise of colleagues from nursing and other discipline as essential to excellent healthcare.</p> <p>15. The nurse takes steps to ensure that the client receives competent and ethical care.</p> <p>16. The nurse advocates the interests of clients.</p> <p>17. The nurse represents the values and ethics of nursing before colleagues and others.</p> <p>18. Professional nurses organizations are responsible for clarifying, securing, and sustaining ethical nursing conduct. The fulfillment of these tasks requires that professional nurses organizations remains responsive to the rights, needs, and legitimate interests of clients and nurses.</p>				

4.0 RESPONSIBILITIES

All staff nurses

References

Ethics in Community-Oriented Nursing Practice. Chap 6.
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International Council of Nurses [ICN] (2012). The ICN Code of Ethics for Nurses. Geneva, Switzerland.

MOH-KSA, General Directorate of Nursing. (2011). Manual of Nursing Policies and Procedures (2nd ed.).