Let’s get ethical: A Review of the 2015 ANA Code of Ethics for Nurses with Explications for Trauma Practice

Speaker: Kathryn Schroeter, PhD, RN, CNOR, CNE

Associate Professor - Marquette University College of Nursing
Adjunct Assistant Professor - Center for Bioethics & Medical Humanities - Medical College of Wisconsin
Editor - Journal of Trauma Nursing
Nurse Scientist & Clinical Ethicist - Froedtert Hospital & Medical College of Wisconsin
Disclosure Statement

• Faculty/Presenters/Authors/Content Reviewers/Planners disclose no conflict of interest relative to this educational activity.
Successful Completion

• To successfully complete this course, participants must attend the entire event and complete/submit the evaluation at the end of the session.

• Society of Trauma Nurses is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.
1. Describe the nine provisions in the 2015 ANA Code of Ethics for Nurses.

2. Discuss the revisions to the 2015 ANA Code of Ethics for Nurses.

3. Identify two applications of the Code to advocacy in trauma nursing practice.
ANA CODE OF ETHICS FOR NURSES

- written list of a profession’s values & standards of conduct
- framework for decision making
- general statements
- offer guidance
- periodically revised
- consistent violations indicate an unwillingness by the person to act in a professional manner & license may be suspended or revoked
Code of Ethics for Nurses with Interpretive Statements

Purpose:

1. It is a succinct statement of the ethical obligations and duties of every individual who enters the nursing profession.

2. It is an expression of nursing’s own understanding of its commitment to society.

3. It is the profession’s nonnegotiable ethical standard. It is non-negotiable in any setting, neither is it subject to revision or amendment except by formal process of revision by the ANA.

The Code Applies to All Nurses

- The term *practice* refers to the actions of the nurse in any role or setting, whether paid or as a volunteer, including direct care provider, advanced practice, care coordinator, educator, administrator, researcher, policy developer, or other forms of nursing practice.

- The values and obligations expressed in the *Code of Ethics for Nurses* apply to nurses in all roles, in all forms of practice, and in all settings.
Please tell me how you would rate the honesty and ethical standards of people in these different fields -- very high, high, average, low or very low?
Dec. 2-6, 2015

<table>
<thead>
<tr>
<th>Profession</th>
<th>% Very high/High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>85</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>68</td>
</tr>
<tr>
<td>Medical doctors</td>
<td>67</td>
</tr>
<tr>
<td>High school teachers</td>
<td>60</td>
</tr>
<tr>
<td>Police officers</td>
<td>56</td>
</tr>
<tr>
<td>Clergy</td>
<td>45</td>
</tr>
<tr>
<td>Funeral directors</td>
<td>44</td>
</tr>
<tr>
<td>Accountants</td>
<td>39</td>
</tr>
<tr>
<td>Journalists</td>
<td>27</td>
</tr>
<tr>
<td>Bankers</td>
<td>25</td>
</tr>
<tr>
<td>Building contractors</td>
<td>25</td>
</tr>
<tr>
<td>Lawyers</td>
<td>21</td>
</tr>
<tr>
<td>Real estate agents</td>
<td>20</td>
</tr>
<tr>
<td>Labor union leaders</td>
<td>18</td>
</tr>
<tr>
<td>Business executives</td>
<td>17</td>
</tr>
<tr>
<td>Stockbrokers</td>
<td>13</td>
</tr>
<tr>
<td>Advertising practitioners</td>
<td>10</td>
</tr>
<tr>
<td>Car salespeople</td>
<td>8</td>
</tr>
<tr>
<td>Telemarketers</td>
<td>8</td>
</tr>
<tr>
<td>Members of Congress</td>
<td>8</td>
</tr>
<tr>
<td>Lobbyists</td>
<td>7</td>
</tr>
</tbody>
</table>

GALLUP
As nursing & its social context change, changes to the *Code of Ethics* are also necessary.

*The Code of Ethics for Nurses* consists of 2 components: the provisions and the accompanying interpretive statements. There are nine provisions that contain an intrinsic relational motif: nurse to patient, nurse to nurse, nurse to self, nurse to others, nurse to profession, nurse & nursing to society.
Nine Ethics Provisions

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 nature of health problems.

Nine Ethics Provisions

2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.

Nine Ethics Provisions

3. Nurses promotes, advocates for, and strives to protect patients’ health, safety and rights.

Nine Ethics Provisions

4. Nurses are responsible and accountable for individual nursing practice as well as the appropriate delegation of tasks consistent with the obligation to provide optimum patient care.

American Nurses Association. (2001)
Nine Ethics Provisions

5. Nurses owe the same duty to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal/professional growth.

American Nurses Association (2015)
Nine Ethics Provisions

6. The nurse participates in establishing, maintaining, and improving healthcare environments & conditions of employment conducive to the provision of quality health care & consistent with the values of the profession.

American Nurses Association (2015)
Nine Ethics Provisions

7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

American Nurses Association (2015)
Nine Ethics Provisions

8. The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.

American Nurses Association (2015)
Nine Ethics Provisions

9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

American Nurses Association (2015)
Revisions

- Research and Evidence-based practice
- Nursing leadership, advocacy
- Interdisciplinary work and collaboration
- Moral distress, incivility, bullying and violence
- Nurses’ voice in social justice and health policy
- Social determinants of health
- Ethical practice environments
Revisions

- End of life care
- Social media, genetics
- Altered standards of care
- Nursing as a global unified profession
- International collaboration to address climate destabilization, violence and other global threats to health
Altered standards of care

- Human rights may be jeopardized in extraordinary contexts related to fields of battle, pandemics, political turmoil, regional conflicts or environmental catastrophes where nurses must necessarily practice under altered standards of care.
• Nurses must engage in discernment, carefully assessing their intentions, reflectively weighing all possible options and rationales, and formulating a clear moral justification for their actions.
• Only under extreme and exceptional conditions, while conforming to international standards and engaging in an appropriate and transparent process of authorization, may nurses subordinate human rights concerns to other considerations.
Social Media

Because of the rapidly evolving means of communication and the porous nature of social media nurses must maintain vigilance regarding commentary that intentionally and/or unintentionally breaches their obligation to maintain and protect patients' right to privacy and confidentiality.
Conscientious Objection

When nurses are placed in circumstances that exceed moral limits or violate professional moral standards, in any nursing practice setting, they must express their conscientious objection to participation.

Conscience-based refusals to participate exclude personal preference, prejudice, bias, convenience, or arbitrariness.
Conscientious Objection

When a particular decision or action is morally objectionable to the nurse, whether intrinsically so or because it may jeopardize a specific patient, family, community or population, or when it may jeopardize nursing practice, the nurse is justified in refusing to participate on moral grounds.
Acts of Conscientious Objection

... are acts of moral courage and may not insulate nurses from formal or informal consequences.

Nurses are obliged to provide for patient safety, to avoid patient abandonment, and to withdraw only when assured that nursing care is available to the patient.

Nurses should also collectively express their concerns via conscientious objection.
Nurse managers/administrators

- Nurses in management or administration should facilitate open communication with staff allowing them, without fear of reprisal, to express concerns or even to refuse an assignment for which they do not possess the requisite skills.

- Create a safe and supportive environment.
The Code of Ethics EMPOWERS nurses!

The Code of Ethics for Nurses provides a framework for nurses to use in ethical analysis and decision-making.

The code of ethics makes explicit the primary goals, values and obligations of the nursing profession.
References