

# Ethics in Healthcare

Every health care worker has had to handle a situation requiring a difficult decision. In some cases, none of the available choices seemed like the right one. In fact, there may not have been a right choice. There may only have been a better one because the choice involved an ethical dilemma. Ethics are derived from values and beliefs of society and help to govern behavior, and thus protect human rights.

## Key concepts of ethics

Autonomy	The basis for this statement is that a patient has the right to make his/her own decisions about health care choices. If a patient is not able to make decisions and he/she has designated another person to make decisions for him/her, that person can make health care decisions for him/her.
Justice	We are required to be fair to all people. All patients have the right to be treated fairly.
Doing good (Beneficence)	This means we do what is “good” for that patient/family. Sometimes it is easy to know what “good” is and sometimes it is not.
Do not harm (Nonmaleficence)	This means that the health care worker must always be careful and know what is needed for that person. Good hand washing and prevention of infection fall into the category of doing no harm. Safety and preventing falls mean doing no harm. Knowing and following the patient’s plan of care will also prevent doing harm. Also, listening to the patient and family’s concerns are essential
Be truthful	This means always being honest. The health care worker is required to be truthful with the family and the supervisor. This doesn’t mean telling everything you know; it means telling the truth.
Respect	This means the health care worker is always required to show respect for the patient, the family, the environment, for their co-workers, their supervisors, and all others as well.

## Ethics at Healing Hands

Healing Hands has an ethical responsibility to the patients and the community it serves, and fulfills this responsibility through ethical care, treatment, services and business practices. The mission of the Healing Hands and subsequent policies are consistent with the support and protection of the rights of patients in all aspects of care, treatment and services provided. Whenever possible, patients/families/legal guardians are included in decisions about the patients’ care, treatment and services, including ethical issues.

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Should the patient require or request care, treatment or services not available or inconsistent with the agency's mission, an offer to refer/transfer the patient to an organization that can fulfill this need will be made and if in agreement, the patient will be referred/ transferred appropriately. The patient/family will be notified of any financial benefit, if any, to the agency as a result of the referral/transfer process.

## Admission, Transfer, Discharge

All decisions to admit, transfer and discharge patients is based solely on the interest of the patient and his/her medical condition and need requirements to ensure access to appropriate level of care in the appropriate setting and treatment that meets the patient's medical needs.

## Billing of Services

Healing Hands deals honestly with all payers. Billing practices that are accurate, ethical, straightforward and honest are maintained, and all billing questions are resolved according to organizational policies and payer contracts in a timely and appropriate manner, without harassment, real or perceived. The effectiveness and safety of care, treatment and services provided by the Healing Hands is consistent for all patients and is not dependent on the patient's ability to pay. Unpaid accounts will be reviewed prior to referral to a collection agency. Should a patient continue to require home health assistance although he/she financially can no longer continue services, all efforts will be made to assist the patient/family obtain alternate financial resources.

## Compensation Programs

Compensation programs for individuals who provide utilization services will not contain incentives, direct or indirect, for those individuals to make inappropriate review decisions. Compensation programs for physicians and management staff are based on quality standards, member satisfaction and achievement of individual professional goals.

## Confidentiality

Information regarding any client/patient admission or condition is not divulged by any healthcare professional without written permission, except as required by law. Patients accessing the Healing Hands for healthcare are informed regarding what information is recorded, how it is used, who will have access to the information and how these practices may affect the patient's right to privacy and confidentiality.

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## Conflict of Interest

Full disclosure will be made by any persons having an investment, financial interest or compensation relationship, direct or indirect, with any supplier, client or competitor of the agency, and they will seek evaluation for participation in the transaction.

## Contracting, Disclosure

The agency deals fairly and honestly with clients, customers, vendors, competitors, payers and financial partners. All communication and disclosure information are accurate, clear and complete to assure reliability. Financial and operational reports are accurate, fair and truthful. Patients are informed of any relationships that exist with regard to contracted services and how they were selected and any financial relationships that exist.

## Individual Responsibility

We are committed to our responsibility to administer and use effectively the physical, technological, financial and human resources for meeting healthcare needs. Our ethical position respects the individual and acknowledges the interdependence of every person within the community. It is also our responsibility to educate, to conduct research and to advance science so that the quality of care and the efficacy and efficiency with which resources are used can be improved over time. It is our responsibility to educate the public as to its healthcare responsibilities and to work toward the instituting of policies which will promote quality healthcare.

## Staff and Governing Body Responsibilities

1. Uphold the values, ethics and mission of the Healing Hands HH
2. Conduct all personal and professional activities with honesty, integrity, respect, fairness and good faith in a manner that will reflect positively upon the agency and in the best interest of the patient population and community served
3. Comply with all applicable local, state and federal laws and regulations in the conduct of organizational or personal activities
4. Maintain competency and proficiency in healthcare industry and general business standards
5. Avoid the exploitation of professional relationships for personal gain
6. Respect confidences including confidential business information
7. Refrain from participating in any endorsement or publicity that demeans the credibility and dignity of the agency and the profession
8. Assure that no conflict of interest exists in any dealings involving the company
9. Use this code to further the interests of the agency and to report any alleged violations to management.

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10. Provide healthcare services consistent with available resources and assure the existence of a resource allocation process that considers ethical ramifications
11. Conduct both competitive and cooperative activities in ways that improve community healthcare services
12. Continuous improvement of business management processes, functions and services
13. Respect of the customs and practices of those served, consistent with the Healing Hands' philosophy
14. Be truthful in all forms of communication, including receivables and avoid information that would create unreasonable expectations
15. Enhance the dignity and image of the Healing Hands through marketing, public relations and education programs without undermining the reputation of competitive businesses
16. Assure the existence of a process to evaluate the quality of care or services rendered
17. Avoid exploitation of relationships for personal advantage
18. Avoid practicing or facilitating discrimination and institute safeguards to prevent discriminatory organizational practices
19. Advise patient of rights, responsibilities and risks regarding care and services provided
20. Assure confidentiality and autonomy of patients and others served

## Marketing

The company restricts all marketing efforts to those services and procedures which are within the technical and licensure limits of the providers of Healing Hands. Marketing programs promote the dignity of the individual and present an accurate, honest and straightforward representation of the benefits of diagnostic and therapeutic procedures it provides and the services it has made available to our community.

## Violations

Staff, students and volunteers who violate the code will be subject to disciplinary action, up to and including termination of employment.

## Ethics Committee

Healing Hands maintains an Ethics Committee to ensure that human dignity and patient rights remain of paramount importance, and to establish a system that allows a staff member, patient or family member to request the convening of the Ethics Committee to address ethical issues.

- Patients/families are provided with written information about the Bill of Rights on admission.

The Ethics Committee shall have a minimum of five (4) members. The membership shall include at least the following:

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- Administrator (Chairperson)
- Director of Nursing
- Home Care clinician
- Community Member

The Ethics Committee provides a forum for sharing ideas and discussing key ethical issues. It functions essentially in an advisory manner. It will not have the authority to make treatment decisions or to overrule physician's orders. Its activity includes tasks such as education staff and review/recommend revision of policies related to ethical issues as well as address any current ethical dilemmas which agency staff may be facing while providing care in the home.

The Ethics Committee meets, as needed, to assure timely review of situations that affect the care and services provided to patients and their families by the agency and may employ teleconferencing or written communication as its primary methods of communication

- Any staff member may request the convening of the Ethics Committee to address what he/she feels constitutes an ethical issue that would benefit from a discussion by the Ethics Committee.
- Ethical issues in home care may include, but are not limited to:
  - patient autonomy and family obligation
  - privacy/confidentiality
  - end-of-life issues and privacy
  - conflicting values wishes or beliefs among several involved persons
  - negligence
  - abuse and neglect
  - incompetent or illegal behavior by personnel
  - refusal of care
  - can the family caregiver handle tasks required to care for the patient?
  - are family members following the wishes of the patient as indicated before they developed dementia?
  - is the patient safe in the home setting?
  - is the employee safe in the patient's home?
- To request the convening of the Ethics Committee, the staff member shall contact the Director of Nursing/Clinical Manager.
- The Director of Nursing/Clinical Manager shall contact the Chairperson of the Ethics Committee who will schedule a meeting of the Ethics Committee.
- The patient, or his/her family, may request a convening of the Ethics Committee to discuss what they feel constitutes an ethical issue by notifying the nurse/therapist caring for the patient of his/her wishes. The nurse/therapist will then follow the above stated procedure to convene the Ethics Committee.
- Quarterly reports addressing Ethics Committee activities shall be submitted to the Quality Assessment and Improvement (QAPI) Committee, the Administrator and the Corporate Compliance Officer

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## **An ethical dilemma**

An ethical dilemma is a situation that requires an individual to make a choice between two equally unfavorable choices. In the ethical dilemma there is no right answer, it often presents itself as something that doesn't feel right and makes the person uncomfortable, causing conflict within themselves.

## **Self-Study**

### **Example #1**

Mrs. Dilbert is 79 years old and has Congestive Heart Failure. She was recently discharged from the hospital and is quite weak. She is receiving oxygen and is on many medications. The plan of care is to assist her with walking in the house and to assist her with a bath. When you arrive, she tells you she doesn't want to get out of bed and walk because, "she is just tired of all this." She also tells you she doesn't want a bath.

### Discussion

Is this an ethical dilemma?

Yes, it could be, if the patient continues to refuse services that are beneficial to her. The conflict is between following the plan of care, which requires the patient to walk, and the patient's wishes to stay in bed. The patient is asking to do one thing, but the health care worker knows that decision is probably not in the best interest of the patient. The conflict is between "autonomy" and "doing good".

What are the ethical concepts in this situation?

1. Autonomy. The patient tells you she doesn't want to walk or have a bath. Autonomy says she has the right to make the decision to refuse services that are in the plan of care.
2. Doing good. The patient needs help, and both: walking and bathing will most likely improve her physical and mental health. The nurse is certain a bath will be "good" for the patient.
3. Do no harm. The patient may be right in not wanting to get out of bed. Her heart condition may have gotten worse and walking may cause her more harm.
4. Be truthful. The patient needs to be informed of the benefits of walking and bathing. The health care worker needs to be honest to the patient, also in documenting the patient's responses.
5. Be respectful. Whatever decision is finally made, the patient and family need to be treated with respect.
6. Be fair. While you may want to spend the rest of your day with this patient, you realize that other patients are waiting for you to come to help them also.

### **Example #2**

Sally Rouse is a home health care worker (she could be a nurse, aide, therapist or anyone) that works for Dupont Home Health agency. She is also a mother of three children, ages 6, 8 and 10. When she comes to work on Monday morning, she notes that she has been assigned to make home visits on 7 patients. This is considered a usual caseload for a day in this agency. Shortly after she begins seeing her patients, she gets a telephone call from the

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school where her children attend. Her ten-year-old son has gotten into trouble and she needs to go to the school that afternoon to talk to the counselor about the situation and her son's behavior. She realizes that she will not be able to see all her patients and attend the school conference

## Discussion:

Is this an ethical dilemma?

Yes. This is an ethical dilemma for Sally. She knows she has two equally important responsibilities, the first to her child and the second to the agency and her patients. There is no good solution for her, because she can't be in two places at one time. The dilemma is between "doing good" for her patients and "doing good" for her child.

What are the ethical concepts in this situation?

1. Autonomy. She has the right to make decisions about her own life and her children. The agency has the right to make decisions about the conduct of their employees while on duty.
2. Doing good. She has the responsibility to do good for her child and her patients.
3. Do no harm. She has to decide how to do no harm to her child, her patients and herself.
4. Be truthful. She needs to communicate with both the school and the agency depending on her decision.
5. Be respectful. She may be frustrated and angry by having been put in this situation by her child, the school and the agency. She needs to continue to show respect to all involved.
6. Be fair. Her decision needs to reflect careful thought for all involved.



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9. In **Example #1** what should the caregiver do? *Multiple choice:*
- a. She could abide by the patient's wishes and leave the home as she requested.
  - b. She could talk to the patient for a while and try to understand why she is feeling the way she feels now.
  - c. She could encourage the patient to get out of bed and talk to her about how much better she will feel after a bath.  
She could make the patient walk to the bathroom and assist her with the bath.
  - d. She could talk to the nurse case manager about the situation.
10. In **Example #2** what should the caregiver do? *Multiple choice.*
- a. She could tell the school she cannot attend the meeting as she is working.
  - b. She could go to the meeting and miss seeing two of her patients that day.
  - c. She could call the school counselor to see if the conference could be rescheduled because of her job.
  - d. She could call her supervisor to see what schedule changes could be made to accommodate her attending the school meeting