

Business ethics assignment

Sociology



**ASSIGN
BUSTER**

CASE STUDY: HELPING PATIENTS AT PLAINFIELD HEALTHCARE CENTER

Question 1 Is it unethical for the managers of Plainfield Healthcare Centre to honour their white patients' requests to be helped only by members of their own race? Was Brenda Chaney subjected to a 'hostile workplace' on the basis of her race? Did the managers of Plainfield Healthcare Centre unethically discriminate against Chaney? It is unethical for the managers of Plainfield Healthcare Centre to honour their white patients' requests to be helped only by members of their own race. Plainfield hired Chaney as a nurse aide or certified nursing assistant (CNA).

As a CNA, she was responsible for monitoring patients, responding to their requests for service, and generally assisting with their daily living needs. Plainfield detailed Chaney's daily shift duties on an assignment sheet that she and other employees received upon arriving at work. The assignment sheet listed the residents in Chaney's unit and their corresponding care needs. It also featured a column with miscellaneous notes about each resident's condition. In the case of Marjorie Latshaw, a resident in Chaney's unit, the sheet instructed nurse aides that Latshaw Prefers No Black CNAs.

Plainfield acknowledges its policy of honouring the racial preferences of its residents in assigning health-care providers. Plainfield maintains it expected its employees to respect these racial preferences because it otherwise risked violating state and federal laws that grant residents the rights to choose providers, to privacy, and to bodily autonomy. Indeed, in its reply brief to the district court on summary judgment, Plainfield acknowledged that the assignment sheet for Chaney "banned" her from assisting Latshaw. For fear of being fired, Chaney went along with the policy.

Although Latshaw remained on her assignment sheet, Chaney reluctantly refrained from assisting her, even when she was in the best position to respond. Once, Chaney found Latshaw on the ground, too weak to stand. Despite wanting badly to help, Chaney had to search the building for a white CNA. Plainfield housed at least two other residents with a similar distaste for black CNAs. One refused Chaney's assistance in the shower, asking for a different nurse aide instead. On a separate occasion, a co-worker warned Chaney that another resident does not care for blacks.

Emotionally, these race-based limitations depressed Chaney, who routinely left work "teary eyed." Plainfield's practice of honouring the racial preferences of residents was accompanied by racially-tinged comments and epithets from co-workers. For instance, in the presence of a resident, a white nurse aide named Audria called Chaney a "black bitch." Another time, a white co-worker looked directly at Chaney and asked why Plainfield "keeps on hiring all of these black niggers? They're not going to stay anyway." The epithets were reported to the unit supervisor, Loretta Askew, who promised to address them.

Although the epithets ceased, co-worker Audria continued to remind Chaney that certain residents were off limits because she was black. Chaney reported these comments to Askew, who renewed her promise to take care of it. Audria eventually left Chaney alone, but Plainfield's racial preference policy remained in place and continued to surface in conversations with other employees. After Chaney had worked at Plainfield for just three months, Plainfield fired her. And in her deposition, Chaney alleges that more

subtle racial slights and comments continued even after management was notified of the problem.

Most importantly, Plainfield acted to foster and engender a racially-charged environment through its assignment sheet that unambiguously, and daily, reminded Chaney and her co-workers that certain residents preferred no black CNAs. Unlike white aides, Chaney was restricted in the rooms she could enter, the care that she could provide, and the patients she could assist. Plainfield argues there is no basis for employer liability because its response to the racial epithets was adequate in stopping the harassment and that any subsequent comments were mere reminders of a particular resident's preference and not racially offensive.

While it is true that Plainfield's actions stopped the use of the most vulgar racial epithets, we cannot agree that any further comments to Chaney about patients' racial preferences were innocent and objectively inoffensive. Nor can we agree that Plainfield's policy of acceding to patient preference, and expecting Chaney to adhere to its instructions, was reasonable. Plainfield claims this policy was necessary to comply with state and federal law. In any event, Indiana's regulations do not require Plainfield to instruct its employees to accede to the racial preferences of its residents.

The regulations merely require Plainfield to allow residents' access to health-care providers of their choice. If a racially-biased resident wishes to employ at her own expense a white aide, Indiana law may require Plainfield to allow the resident reasonable access to that aide. But the regulations do not say that a patient's preference for white aides that Plainfield employs trumps

Plainfield's duty to its employees to abstain from race-based work assignments. Plainfield's reading of Indiana regulations is also untenable because it puts Plainfield at risk of violating duties of medical care that it owes its residents.

A potential violation could have occurred when Chaney, adhering to Plainfield's policy, reluctantly left Latshaw on the floor so she could search the building for a white nurse aide rather than immediately attend to her needs. Plainfield's claim of "good-faith" appears less than compelling as a factual matter as well. If Plainfield was worried that dishonouring race-based work preferences risked violating Indiana's regulations, it could have asked Indiana's State Department of Health whether state law required Plainfield to direct its employees to cater to its residents' racial preferences.

The record does not show an attempt to seek such guidance. Plainfield told Chaney that it was excluding her from work areas and residents solely on account of her race, thereby creating a racially-charged workplace that poisoned the work environment. In less than three months, Chaney reported at least three specific incidents of harassment involved racial slurs directed toward her. More fundamentally, Plainfield never corrected the principle source of the racial hostility in the workplace-its willingness to accede to a patient's racial preferences.

The hostility that Chaney described came from daily reminders that Plainfield was employing her on materially different terms than her white co-workers. Fuelling this pattern was the racial preference policy, both a source of humiliation for Chaney and fodder for her co-workers, who appeal to it

regularly. As a conclusion, the managers of Plainfield Healthcare Centre unethically discriminate against Chaney. Chaney becomes depressed in the workplace because her colleague always teased and humiliated her and so on.

Chaney also must face with lots of barrier even though as a CNA, her responsible should be monitoring patients, responding to their requests for service, and generally assisting with their daily living needs. She has limits to do her responsibilities. Because of the discrimination by Plainfield Healthcare Centre, Chaney become demotivated and afraid to help if white patient falling sick even she want to. It is unfair for Chaney to face this situation and she can respond if she wants but because afraid she will fire, she just remain silent to these issues.