

Professional standards and institutional ethics in nursing



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Case One

Unfortunately, abuse in health care exists, especially in nursing homes. With that being said, all health care personnel must be aware of the possible signs of abuse and educated on what to do when a case like this one presents itself. Mrs. Lewis absolutely acted correctly and was bound by law to report her findings. There are federal and state laws that demand health care workers report noted violence or abuse against vulnerable populations to a specific state agency, like Adult Protective Services (CPH & Associates, 2017, para. 1). When Mrs. Lewis became a nurse, she made an oath to do no harm and all of the actions that she took were her ultimate duty.

She was correct to go over the head of her administrator and hire a lawyer in order to ethically take care of this issue. Employer retaliation is never acceptable and he must be held liable. In the event that Mrs. Lewis could not afford a lawyer, she could have went to Human Resources (HR) to report the complaint. If HR fails to fix the issue or the administrator fails to admit his offense, she should take the matter to the Equal Employment Opportunity Commission (EEOC) or another state employment agency (Guerin, 2017, para. 11). When one chooses to do the right thing, there are always avenues that can be taken to ensure he or she is protected and the issue is handled.

One could call Mrs. Lewis a whistleblower in this case. The Occupational and Safety Health Administration enforces a multitude of whistleblower protection laws that include anti-retaliation provisions that protect employees from being fired or punished for issuing complaints or exercising

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given rights (USDOL, 2017, para. 1). The law protects whistleblowers, but the individual must report incidents within a specified time and give detailed descriptions of the retaliation effort.

In this case, the art of intimidation as utilized by Mrs. Lewis' lawyer is necessary in order to protect patients. The lawyer needed to threaten the hospital with possible exposure and penalties if they did not ethical comply. This case is not only about the hospital and its workers doing the right thing, but primarily about the safety of the patients and justice for those that have already been wronged. Intimidation is not always a bad thing, but can be utilized to bring about positive change.

Power is always going to exist in health care, therefore it must be considered. Power is intended to be a good thing that brings about order, direction, compliance, and a myriad of other necessary qualities.

Unfortunately, power can be abused. Even so, power must be respected and understood in health care in order to generate a successful environment with satisfied customers.

Mrs. Lewis took the right course of action in this case. Her actions were ethical and legal and hopefully ended with patients being cared for properly. Health care is about the customers – patients. Patient care must be quality and their well-being must come first. Mrs. Lewis was looking out for the best interest of the patients at Shady Rest and her actions were ethically sound and necessary.

Case Two

Staffing is quickly becoming a continual issue in hospital facilities. This problem cannot be denied in conjunction with the increasing nursing shortage in the United States. Nurses and aides are being spread thin amongst an increasing insured society. In reality, the primary function of the hospital is to provide optimal quality care to all patients. In order to do this, staffing ratios must be appropriate.

Mrs. Allesfertig was correct to pull trained nurses from other units to staff the ICU. Dr. Bestknabe was also correct to halt admissions to the ICU until staffing kinks were worked out on a permanent basis. Both took the course of action that ensured patients received adequate, safe, and timely care and nursing thresholds were respected.

For example, take an ICU nurse that has four patients. Three patients are on a ventilator and septic. One patient is receiving blood products and being dialyzed, while receiving Bilevel Positive Airway Pressure (BiPAP). All four patients require vital signs at least every thirty minutes, turning every two hours, intravenous pushes of sedating medications, and so on. One ICU nurse cannot and should not be taking care of four patients this critical. It is not safe for the patient nor the nurse. Medication errors are more likely to be made, key findings are often missed, and patient injury is more likely to occur. In addition to these firsthand experiences, there have been studies completed that connect better staffing with lower mortality rates and lower nurse burnout rates (Burling, 2010, para. 1).

The new staffing policy that is created should allow nurses to have the authority to make judgments based on nurse to patient ratios. There should

be a nurse float pool available when there are callouts or an influx of patients. If there are not enough staff to take care of the patient load, patients would have to be moved to other units or hospitals. This is quite unfortunate, but necessary in order for patients to be taken care of safely. In addition, the American Nurses Association encourages a policy that empowers nurses to be in control of staffing plans based on day-to-day changes in resources and patients (ANA, 2016, para. 5).

While policies are necessary and vital to the success of any organization, professional judgement must always be used. There must always exist some leeway in order to be flexible with things changing on a daily basis. Patient care must be held in the highest regard, therefore all decisions made must be in their best interest. When patients are not properly cared for, legal and ethical ramifications can occur.

References

ANA. (2016). Nurse Staffing. Retrieved January 12, 2017, from <http://www.nursingworld.org/MainMenuCategories/Policy-Advocacy/State/Legislative-Agenda-Reports/State-StaffingPlansRatios>

Burling, S. (2010, April 20). “ More nurses, less death”: The Philadelphia Inquirer on Penn’s nurse staffing ratio study. Retrieved January 12, 2017, from http://www.truthaboutnursing.org/news/2010/apr/20_more_nurses.html

CPH & Associates. (2017). NURSES AND MANDATORY REPORTING LAWS.

Retrieved January 10, 2017, from [http://www.cphins.com/nurses-and-](http://www.cphins.com/nurses-and-mandatory-reporting-laws/)

[mandatory-reporting-laws/](http://www.cphins.com/nurses-and-mandatory-reporting-laws/)

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Guerin, L. (2017). Workplace Retaliation: What Are Your Rights? Retrieved January 10, 2017, from [https://www. nolo. com/legal-encyclopedia/workplace-retaliation-employee-rights-30217. html](https://www.nolo.com/legal-encyclopedia/workplace-retaliation-employee-rights-30217.html)

United States Department of Labor [USDOL]. (2017). Worker Protections. Retrieved January 10, 2017, from [https://www. whistleblowers. gov/wb_filing_time_limits. html](https://www.whistleblowers.gov/wb_filing_time_limits.html)