# Ethics in health management



Ethics in Health Management Case details: The situation is that of an elderly person requiring attention and medical care. The case is different because she has got a medical condition and no family member is around to take care of her. She has distant family members who should decide on the way she should be taken care of. She should benefit by being taken care of by the other members of the family. If no action was taken, she would view it neglect and alienation from the other family members.

## Details of the case:

# a. Obligations:

Family members have got the duty to ensure that the elderly lady is taken good care of and that she gets access the required medical care. b. Ideals: justice, beneficence, receptance, loving kindness and compassion.

# c. Consequences:

If the lady is not taken good care of then she might end up succumbing to the illness due to lack of medical care. Living in an untidy house combined with poor feeding might also raise the risks of her being infected by other diseases. Lack of care may make feel ignored and that the family does not recognize her as being one of them.

3 Alternative 1. One viable solution is to take her to an elderly people facility where she will be taken care of with the other elderly people.

Alternative 2. Another good idea is to incorporate her into one of our homes. Where she can be taken care of by the family members.

Alternative 3. The last solution would be to employ a person to assist her by ensuring that all her household duties are taken care of and that she is in a good health condition.

My situation is that of my 89 years old aunt who lives alone and has no other https://assignbuster.com/ethics-in-health-management/ family around her. She lives in a distant town from where I stay, and that makes it hard for me to monitor her condition. I pay her a visit and to my disappointment find her house in a mess and all I do is worry about her wellbeing and security. The other thing that troubles me is that she has a medical condition, and I fear that she might no longer be able to control her diabetic condition, as she may not remember to go for medical check-ups, as it is required for her.

In most cases, the elderly have been marginalized hence lacking the needed health care services entitled for the aged. Sometimes funds that are secured to help the aged are withdrawn: citing lack of compliance or self-care (Caroselli, 2003; Metell and Moo, 1998). This is unethical. In this case, I have the obligation of ensuring that she accesses the rightful medical care she deserves, and she stays in a clean organised environment. Despite the fact that she already declined being taken an institution of the aged, it seems that it would be the only rightful thing to do, and would be for her own bosom, because of her medical condition. In the institution, the required level of attention would be given to her, and a medical expert would be available in case her medical condition got worse. She would also have company from age mates, unlike, if she was transferred to a younger persons place, hence she would not get as bored.

This has already triggered family disputes, with many supporting that she should stay at her place, but not offering any solutions to how she could be taken care of. Family members opposing the move claim that, it is not ethical for her to be taken to an elderly people's institution, and that she deserved something better. They also provided another solution, which was to employ a person who would take care of her at her place. The only other

option is to move her into one of our homes, of which, she would become a burden to people as they have other issues to attend as well as their families to take care of.

After many days of argument and decision making, we decided to give her the expensive but fulfilling pleasure of having a person at her place, who would help her with the house hold chores and ensure that her medical condition was well taken care of (Twohy, 2004; Caroselli, 2007).

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