

Chapter 1 : Ethical Practice: NCLEX-RN || [theinnatdunvilla.com](http://theinnatdunvilla.com)

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The authors review relevant theory while integrating a constitutive approach to studying organizational culture and communication. Practical guides for multiple data collection methods are provided, and the workbook format is full of interactive tools that engage students and reinforce learning. The revised OCA cultural analysis model in this edition provides the below elements. Professionals come away equipped to apply cultural insights to fostering inclusiveness in relation to diversity, supporting organizational change, making leadership more dynamic, understanding the link between ethics and culture, and achieving personal and professional growth. Reviews "Organizational Culture in Action is one of my critical go-to workbooks for leadership education because it provides practical and ethical real-world steps for diagnosing organizational culture, including diversity and inclusion practices. My students and I find the book nicely balanced between theory and methods and ideal for those seeking to learn how to conduct organizational ethnography. The format makes it an ideal companion for individuals or groups who are undertaking a cultural analysis in organizations, or for the purpose of corporate training and development. The writing is accessible, and the overall approach makes for interesting and even fun work with students. Cultural Analysis Planning 1. Setting the Stage 2. The Significance of the Stage: The Value of Cultural Analysis Part 2: Cultural Analysis Basics 3. The Concept of Culture 4. Cultural Elements Part 3: Cultural Data Collection and Interpretation 5. Interviews and Surveys 8. Getting Inside the Character: Cultural Analysis Application 9. Conclusion About the Author Gerald W. He teaches undergraduate and graduate courses in organizational communication, theory, and intercultural communication.

## Chapter 2 : The Nursing Code of Ethics: Its Value, Its History

*The written and video materials were very provocative and stimulated lots of thinking about ethics in new ways. You did an excellent job of involving the student audience as participants in building ethical perspectives for good counseling."*

The American Nurses Association has guided and supported nursing practice through creation and implementation of a nationally accepted Code of Ethics for Nurses with Interpretive Statements. This article will discuss ethics in society, professions, and nursing and illustrate how a professional code of ethics can guide nursing practice in a variety of settings. We also offer a brief history of the Code of Ethics, discuss the modern Code of Ethics, and describe the importance of periodic revision, including the inclusive and thorough process used to develop the Code and a summary of recent changes. Finally, the article provides implications for practicing nurses to assure that this document is a dynamic, useful resource in a variety of healthcare settings. The American Nurses Association ANA has guided and supported nursing practice through policy development and action; establishment of the scope and standards of nursing practice; and implementation of a nationally accepted Code of Ethics for Nurses with Interpretive Statements hereafter referred to as the Code; ANA, b. This article will discuss ethics in the context of society, professions, and nursing and illustrate how a professional code of ethics, specifically the Code, can guide nursing practice in a variety of settings. We also offer a brief history of the Code of Ethics, discuss the modern Code of Ethics and describe the importance of periodic revision, including the inclusive and thorough process used to develop the Code and a summary of recent changes. Finally, the article provides implications for practicing nurses to assure that the Code is a dynamic, useful resource in a variety of healthcare settings. Ethics in Society, Professions, and Nursing Ethics of Society The agreement to live by rules may be externally imposed by laws and leaders or internally imposed by the common morality. The field of ethics addresses how we ought to treat each other, how we ought to act, what we ought to do, and why. We manage ethical issues every day as members of society, as members of families, and as members of a profession. To live in society, for example, we are obligated to not kill or hurt one another or to take from others what is not ours. These rules are not just in our own best interest not to be killed, for instance, but they promote the flourishing of our society. We would likely have great difficulty living productive lives if we constantly worried about our homes being ransacked or our lives being in danger. The agreement to live by rules may be externally imposed by laws and leaders or internally imposed by the common morality. These are not necessarily imposed upon us, as through strong leadership, but are internally driven moral rules. Regardless, our abilities to live peacefully and productively and to identify our obligations to one another in our own society and across cultures are informed by ethics. Ethics of Professions To consider ethical issues, some level of guidance about how to do so should be in place. Citizens are not morally required to keep in confidence information they hear about another. As professionals, we agree to identify those ethical issues that tend to arise within our chosen profession. To consider ethical issues, some level of guidance about how to do so should be in place. For many professions, this is done with a code of ethics. These documents guide practice decisions and set a standard of practice behavior expected of every member of a given profession. Ethics and Nursing Nurse involvement in biomedical ethics. Nurses typically encounter ethical issues in three realm of biomedical ethics including the broad, overarching, health-related problems that impact policy or society as a whole; dilemmas that arise within organizations; and those that affect patient populations or individual patients. On a policy or societal level, broad questions are asked. Examples of such queries may include discussion about whether access to healthcare is a right or a privilege; how to protect research participants from harm; the most fair method for resource distribution during an Ebola crisis; or the inappropriateness of punitive measures against pregnant women who use drugs and alcohol. Nurses are involved in these questions as clinicians, researchers, policy makers, ethicists, and educators. At the organizational level, many ethically challenging questions arise for nurses. In the s, Chambliss conducted a sociological study of hospital nurses to better understand the kinds of ethical issues that arose Chambliss, In their analysis of the moral habitability of the nursing work environment, Peter et al. They also found, however, that nurses tended to identify paths of resistance and

influence, such as finding strength in numbers and being assertive in order to achieve their goals. Thus, it is clear that the organizational ethics aspects of healthcare are important factors for nurses. An effective ethical code for nursing practice must provide guidance on managing ethical problems that arise at the societal level, the organizational level, and the clinical level. On a clinical level, ethical questions arise every day. In a study of the ethical issues encountered by nurses, Ulrich et al. Other common issues included advanced care planning, surrogate decision making, end-of-life decision making, and breeches of confidentiality Ulrich et al. Nurses acted in several ways to address these problems, such as communicating and speaking up, advocating and collaborating, being present and empathetic, and being informed Pavlish et al. The utility of the Code. This scenario demonstrates the benefit of the Code as a useful tool for evaluation and action. Logan is a 48 year old who has struggled with an opioid addiction for the past 5 years. Recently, he was playing basketball with friends when he slipped on the court, fell, and broke his arm badly. After his arm was repaired surgically, the physician orders acetaminophen, milligrams by mouth or normal saline, 1 cc, IM, prn for pain. The nurse asks the physician about this, concerned about Mr. Logan is in excruciating pain. Logan participate in his own pain management plan? The action to question this physician order suggests that nurse believes that deceiving the patient is wrong. Provision 1 of the Code states that the nurse is obligated to act with compassion and to respect the dignity and autonomy of each patient ANA, b. Lying to the patient, watching him suffer, and not involving him in his plan of care achieve neither goal. However, in this case, there is an inkling of doubt because of the possibility of a placebo effect. That is, the saline injection may induce some analgesic effect even though it is not a pain medication. Also, there is some concern that while an opioid may provide short-term benefit, it could cause harm in the longer term by causing re-addiction. After review of the Code and a search of the literature, Mr. Investigating the risks and benefits of placebo use and pain management in patients with histories of substance abuse will be helpful to answer this question. However, placebo use continues even after years of advocacy against this practice. Thus it is not surprising that there are healthcare providers still willing to use placebos, including the physician in Mr. A recent position statement by the American Society for Pain Management Nursing supports a pain management regimen including careful monitoring and agreement with a fully-informed patient Oliver et al. Using a placebo to treat Mr. The question now becomes, how should the nurse best advocate for this patient? Whether or not to advocate is not in doubt Provision 3 , but just how to do that is a bit more difficult. This dilemma is also an organizational issue as the nurse does not have authority to single-handedly change the prescription. Clearly, advocating will involve collaboration with a hesitant physician. The Code can provide some guidance, but some weighing and balancing of the different provisions is necessary. In response to Mr. This would alleviate the concern about deception and withholding information Provision 5. Conversely, this may undermine Mr. In addition, it may threaten the collegial relationship between the nurse and physician Provision 2. Logan has been discharged. Provision 6 also addresses maintaining an ethical work environment in order to support quality of care. Another alternative for the nurse is to collaborate with the physician first, bringing to light the concerns about patient deception and the evidence of inappropriate placebo use. This alternative action will hopefully have several benefits, such as increasing the likelihood of a more effective treatment plan, maintaining patient trust in the healthcare team, and supporting a professional and collegial doctor-nurse relationship. The potential benefits of approaching the physician first suggest that this is the more sound, justifiable solution to the dilemma. Ethical issues in clinical nursing often involve not only dilemmas at the bedside, but also dilemmas at the organizational level, such as navigating a complex system to protect a patient or provide quality care or identifying ways to collaborate with colleagues to maintain strong working relationships and trust. The Code ANA, b can provide direction for multiple levels of direct and indirect care. The Code applies to other areas of nursing practice as well, such as nursing education, research, and policy making. Advancing the profession through research and policy by attending to informed consent, advocacy, and accountability of practice are examples of other professional areas of practice with potential ethical dilemmas that make the provisions of the Code a relevant nursing resource. A Brief History of the Code of Ethics The first formal code of ethics for nurses was adopted in Fowler, However, a need for ethical guidance was recognized soon after modern nursing began to formalize in the mids. Although in , one of the initial goals of the newly established

American Nurses Association was to write a code of ethics, urgent issues such as nurse registration, the welfare of nurses, and accreditation processes for nursing schools took precedence. Fowler, The provisions were framed in terms of the various relationships between the nurse and patient; the nurse and medicine; and nurses and their profession. The first formal Code for Professional Nurses was adopted in 1955 and was edited slightly before being revised in 1976. At the same time as the suggested code, ethics was on the minds of nurse faculty and administrators in terms of training and educating nursing students and practicing nurses. Crawford, ; Ethical Problems, ; Ethical Problems, ; Fowler, Their work highlights the thinking of the time, that is, that character was a significant factor in determining right action. The revision of the Code included several significant changes. ANA, First, prior to this revision, the provisions were simply listed with little, if any, interpretation. The new code provided brief interpretations which helped the nurse see how the provision might be applied. Second, the provisions were reduced from 17 to a more manageable 10. Finally, there was a fundamental shift in language in the revision. With changes in the level of practice independence; advances in technology; societal changes; and expansion of nursing practice into advanced practice roles, research, education, health policy, and administration, the Code has been revised over time to introduce obligations to advance the profession and build and maintain a healthy work environment. ANA, ; ANA, ; ANA, ; ANA, b. As in the past, the current Code of Ethics with Interpretive Statements ANA, b forms a central foundation for our profession to guide nurses in their decisions and conduct. It establishes an ethical standard that is non-negotiable in all roles and in all settings. The Code is written by nurses to express their understanding of their professional commitment to society. The provisions and interpretive statements reflect broad expectations without articulating exact activities or behaviors. Nurse practice acts in many states incorporate the Code of Ethics. Even though the Code is primarily ethics-related, it also has legal implications. Given the importance of the Code to the profession on so many levels, revisions continue on a regular basis. The Process for Revising the Code [The Code] is a living document that informs and is informed by advances in healthcare. As society changes, so must the Code. ANA, b.

### Chapter 3 : Systems Approach Workbook for Health Education & Program Planning

*IntegratedEthics Facility Workbook. The IntegratedEthics Â® Facility Workbook is designed to help health care facilities assess current ethics quality, identify strengths and opportunities for improvement, set goals, and develop quality improvement plans.*

While some have the courage to speak up or take action, others do not. Pavlish found nurses also were concerned that patients and families were not fully informed about treatment options and their clinical prognosis and whether the patient voice was represented. For instance, advance directives were not being followed because families wanted something else. Nurses often come to Walton with concerns about informed consent, pain and going beyond a common goal, but dilemmas in nursing ethics are not limited to end-of-life care. The Work Environment Nurses report communication difficulties and workplace bullying and violence as serious work environment ethical dilemmas, Turner said. She is developing models and tools to allow such discussions to take place where everyone can feel comfortable speaking up. Did the patient or family feel cared for? Did you learn something? Priorities also are reset as new patients arrive and colleagues need something. As nurses develop and gain experience, they become better at that. Technology keeps evolving and blurring traditional values about privacy and boundaries. Education about what is available and how it can be use appropriately, without causing distress to patients, can help practitioners with this ethical issue, Turner indicated. Other Nursing Ethics Concerns Cultural diversity and caring for people with different values and traditions, and accepting their rituals, can present challenges in the practice setting, Turner explained. Education can help address this type of scenario. Access to care and affordable and equitable care present ethical dilemmas for nurses as they try to make that happen in their communities. Nurses working in non-acute care settings, such as schools and prisons, have concerns related to bedside nurses but they can differ, Turner explained. For instance, some school nurses are now dealing with the fallout from legal actions in their states that now allow untrained lay people to administer insulin and other medications to students. Additionally, parents opting to not vaccinate pose a challenge for school nurses. She explained that ethical concerns may change as the nurse matures in his or her role. Ulrich discussed the importance of education in nursing programs to prepare undergraduate and graduate students for clinical practice. The Joint Commission requires nursing ethics resources be available--be it a committee, an individual or a community organization, Turner said. She advocated for more creative solutions. At Penn, nurses generate between one-third and one-half of the ethics consults. In fact, having conversations with the health care team and holding family conferences can help ease the ethical conflict, Pavlish reported. Walton made the argument for moral advocacy, speaking up and discussing options early. Originally published on NurseZone. Start Your Job Search.

**Chapter 4 : Regulation and Education | ICN - International Council of Nurses**

*Bioethics Research Library of the Kennedy Institute of Ethics. Bioethics Literature and Resources. EthxWeb: Literature in Bioethics A Workbook for Nurses. Creator.*

In this section of the NCLEX-RN examination, you will be expected to demonstrate your knowledge and skills of ethical practice in order to: For example, nurses are held to ethical principles contained within the American Nurses Association Code of Ethics. Ethics and ethical practice are integrated into all aspects of nursing care. The two major classifications of ethical principles and ethical thought are utilitarianism and deontology. Deontology is the ethical school of thought that requires that both the means and the end goal must be moral and ethical; and the utilitarian school of ethical thought states that the end goal justifies the means even when the means are not moral. The ethical principles that nurses must adhere to are the principles of justice, beneficence, nonmaleficence, accountability, fidelity, autonomy, and veracity. Nurses must be fair when they distribute care, for example, among the patients in the group of patients that they are taking care of. Care must be fairly, justly, and equitably distributed among a group of patients. Beneficence is doing good and the right thing for the patient. Nonmaleficence is doing no harm, as stated in the historical Hippocratic Oath. Harm can be intentional or unintentional. Nurses are accountable for their nursing care and other actions. They must accept all of the professional and personal consequences that can occur as the result of their actions. The nurse must be faithful and true to their professional promises and responsibilities by providing high quality, safe care in a competent manner. Autonomy and patient self-determination are upheld when the nurse accepts the client as a unique person who has the innate right to have their own opinions, perspectives, values and beliefs. Nurses encourage patients to make their own decision without any judgments or coercion from the nurse. The patient has the right to reject or accept all treatments. Veracity is being completely truthful with patients; nurses must not withhold the whole truth from clients even when it may lead to patient distress. The most commonly occurring ethical issues and concerns in healthcare include the allocation of scarce resources and end of life issues. Bioethics is a subcategory of ethics. Bioethics addresses ethical concerns like those that occur as the result of advancing science and technological advances. Some of the most common, current bioethical issues revolve around stem cells, cloning, and genetic engineering. Recognizing Ethical Dilemmas and Taking Appropriate Action Nurses have the responsibility to recognize and identify ethical issues that affect staff and patients. For example, providing nursing care for clients undergoing an abortion may raise ethical and moral concerns and issues for some nurses; and some patients may be affected with a liver transplant rejection because donor livers are not abundant enough to meet the needs of all patients who request it. Many hospitals, medical centers and other healthcare facilities have multidisciplinary ethics committees that meet as a group and resolve ethical dilemmas and conflicts. Nurses should avail themselves to ethicists and ethical committees within their facility when such ethical resources and mechanisms are present in order to resolve ethical concerns and ethical dilemmas. The steps of the ethical decision making process, like the problem solving process, are: Problem definition is the clear description of the ethical dilemma and the circumstances revolving around it. During this phase of the ethical decision making process includes a review of ethical codes, published evidence based practices, declaratory statements, professional position papers and the professional literature. The collected data is then organized and analyzed. All possible solutions and alternatives to resolve the ethical dilemma are explored and evaluated. Selecting the Best Possible Solution. All potential solutions and alternatives are considered and then the best and most ethical action is taken. Like the evaluation phase of the Nursing Process, actions to resolve ethical issues are evaluated and measured in terms of their effectiveness to resolve the ethical dilemma. Informing the Client and Staff Members of Ethical Issues Affecting Client Care Nurses have the responsibility to identify ethical issues that affect staff members and patients; and they also have the responsibility to inform staff members and affected clients of ethical issues that can and do affected client care. Although a rare occasions, a patient may, at times, ask you to do something that is not ethical. For example, a patient may ask a nurse to assist in their suicide at the end their life or they may inquire about another patient in terms of their diagnosis. When something like this occurs, the

nurse must inform the client that they cannot do it for ethical and legal reasons. Clients may also need information about ethics can affect the care that they choose or reject. For example, a client may ask the nurse about whether or not it is permissible ethically and legally to reject CPR at the end of life or to take pain medications even if it hastens their death. Evaluating the Outcomes of Interventions to Promote Ethical Practice As with all other aspects of nursing care, the outcomes of the interventions to promote ethical practice are evaluated and measured. Some of the evaluation criteria that can be used to determine and evaluate the outcomes of the interventions to promote ethical practice can include one or more of the following: Is staff knowledgeable about ethics and ethical practice? Is staff effectively applying ethical principles to their daily practice? Are clients and staff fully knowledgeable and informed about ethics and ethical practice? Were all appropriate professional resources, including codes of ethics and the professional literature, employed to resolve the ethical dilemmas?

## Chapter 5 : Ethical Counselling: A Workbook for Nurses

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Promoting nursing education through scholarships and financial aid. The Nurse Practice Act select all that apply: Is a federal document that all states must follow. Is established by each state to define the scope of nursing practice in that state. Protects nurses from lawsuits for violating rules about patients confidentiality. Established fair compensation and benefits for nurses. Dictates the acceptable scope of practice for the different levels of nursing. A The Patient Bill of Rights provides the patients right to refuse medications and treatments. The nurse has a responsibility to advocate for the patients and assure them of their rights. In addition, patients have the right to be educated about medications and treatment, which allows them to make an informed decision. Safe and Effective Care Environment: C It is within the nurses scope of practice to advocate for the patient. The nurse is the voice for the patient when needed. The nurse defends the patients rights to their beliefs and values. Cultural Diversity Cognitive Level: Religious and Spiritual Influences on Health 4. B All patient information is confidential, and only initials should be used during the student clinical rotation. Communication and Documentation Content Area: D Confidentiality is maintained, whether in a facility or out in public. If the patient initiates contact, then responding back is appropriate. A Patient information is confidential this includes even acknowledging the presence of that person in the facility. The nurse is providing information in the group to help this patient acknowledge a recent success. Therapeutic Communication Cognitive Level: Veracity is telling the truth. Nursing Ethics Cognitive Level: Good Samaritan law The basis for all Good Samaritan laws is that a third party cannot be charged with negligence unless help is given recklessly or that person makes the situation significantly worse, according to the guidelines for that particular state. Legal Rights and Responsibilities Even though giving false information to the patient reassured the patient, it is not ethical. Ethics provide a framework of action to address conflicting principles. Accountability is accepting responsibility for any actions performed while caring for a patient. Concepts of Management and Supervision Proxemics Study of spatial relationships including space, time, and waiting, which are all influenced by ones culture. A nurse below the minimum competency is unsafe. Nursing Licensure Cognitive Level: Act The Nurse Practice Act defines the level of practice for the nurse. A nurse can consult with the Nurse Practice Act when unsure about a specific skill. The Nurse Practice Acts varies from state to state. Coordinated Care and Legal Rights and Responsibilities Department of Health and Human Services to provide national standards pertaining to the electronic transmission and communication of medical information between patients, providers, employers, and insurers. Joint Commission The Joint Commission ensures that standards in the hospital and other health care organizations are met and maintained. Their goal is to reduce the risk of undesirable patient outcomes and encourage continuous improvement. Management of Care Cognitive Level: Concepts of Management Samaritan The Good Samaritan Act protects individuals who attempt to provide medical treatment. The Good Samaritan Act does not always protect nurses, physicians, and other medically trained persons. Rights In many cases, this document was adopted to protect the rights of patients while in the facility; thus the Bill of Rights may vary from state to state, even though they are based on federal guidelines. These rights are to be listed in the facility and placed in a prominent area of the facility or the patients room. Nurses and health care workers have a moral, legal, and ethical responsibility to report known or suspected abuse of people who cannot care for themselves. By law nurses are mandated to report child abuse throughout the United States. Joint Earning accreditation by Joint Commission indicates commitment to quality on a daily basis within the entire institution. The commissions goal is to reduce the risk of undesirable patient outcomes and encourage continuous improvement. A, B, D It is a legal right that advocates for the patient. Facilities are required to post the Patients Bill of Rights. HIPAA provides guidelines on how confidential health care information is handled, including with the use of technology. HIPAA does not impact other patient rights such as giving informed consent. The patient has a right to access to his or her medical record, but there is a specific process to be followed to achieve this for each health care institution so

immediate access is usually not available. A, B, C The Joint Commission is the leading national accreditation body of health care organizations that monitors quality outcomes. B, E A nurse will consult the Nurse Practice Act in his or her state to determine if the nurse is performing at the appropriate level based on one's preparation.

#### Chapter 6 : The Top Nursing Ethics Challenges for Nurses | NurseZone

*The ANA Center for Ethics and Human Rights. The Center is committed to addressing the complex ethical and human rights issues confronting nurses and designing activities and programs to increase the ethical competence and human rights sensitivity of nurses.*

#### Chapter 7 : Organizational Culture in Action: A Cultural Analysis Workbook, 3rd Edition (Paperback) - Routledge

*Chapter 3: Ethics and Law Multiple Choice Identify the choice that best completes the statement or answers the question. \_\_\_\_ 1. A patient is expressing anger when the nurse attempts to make him take a medication that he is refusing.*

#### Chapter 8 : NCSBN Website Policies | NCSBN

*As previously discussed, nurses are expected to apply the ethical guidelines provided in the American Nurses Association's Code of Ethics, the American Medical Association's Code of Ethics, the World Medical Association's Code of Ethics, the American Nurses Association's Standards of Care and Standards of Practice, American Nurses Association's.*

#### Chapter 9 : Chapter 3: Ethics and Law(FREE) My Nursing Test Banks - Test Bank Go!-all FREE!!

*The National Council of State Boards of Nursing (NCSBN) is a not-for-profit organization whose purpose is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.*