Legal and ethical considerations for Registered Nurses

In completing this topic, you will: Review the concepts of ethical decision making in person centred care.

Review principles of critical thinking and moral reasoning in nursing care.

Learn about the various mandatory requirements and codes to ensure safe nursing practice.

Review and identify the key requirements of the NMBA Code of Conduct and Code of Ethics

Critical thinking, moral reasoning and ethical decision-making are core to the day-to-day work of nurses. Nursing practice is guided by the NMBA Code of Ethics. However, as a nurse you will require explicit knowledge and practice of ethical decision-making frameworks to assist you to critically think, and morally reason your way through the many ethical challenges encountered in practice.

There are a number of models of ethical decision making that assist nurses and other health care providers to think through ethical issues in a logical manner. In your clinical practice you will have come up against ethical issues. You will have experienced that at times the issues are clearly defined and it is easy to see right and wrong. At other times it is more difficult to know how best to proceed. Alternatively, there may be differences of opinion about what is the best choice between staff or between staff and patients/significant others.

Reflect on these questions:

How do you know what to do when you are faced with an ethical issue/dilemma in practice?

What do you use to guide your reasoning?

Are you aware of the steps you take in your thinking to arrive at your sense of right or wrong?

How do you manage when the issues are not so straightforward?

How do nurses and other health care professionals discuss/resolve ethical differences in practice?

What is the role of the patient/client in the decision-making process?

Different types of moral behaviour are likely to give rise to ethical problems. Some examples include:

Professionals who have a genuine knowledge deficit about ethics: This occurs when the health professional concerned does not see a situation as being ethical or moral problem, but instead sees it solely as a clinical problem. An example: NFR or ‘Do not resuscitate’ orders on hopelessly or chronically ill patients. Many health professionals think these orders are solely a clinical problem and do not see the ethical or moral basis to the situation.

Autocratic behaviour of an authoritarian professional, or committee: Some professionals have moral beliefs that are black and white, and do not take kindly to having their opinions or beliefs questioned. These people are unable to see different points of view when decisions are discussed with them.

'Groupie' moral standards: Problems arising from ‘groupie’ moral standards occur when a health professional is so much a group player that they do not question the behaviours of other group members, nor the care and treatment others provide.

Insensitivity of the professionals/s involved: These problems arise when a professional is thoroughly convinced that they are right, and they undertake action without considering the feelings of the client or patient. An example would be a nurse who believes all patients should be told the truth, even those who are not able to cope with that information or those who have requested not to receive certain information at that time. The insensitive, unfeeling nature of this type of care does not conform to any professional standards.

Moral insensitivity can also cause ethical problems when health professionals are not vigilant about a patient’s rights and the ethical principles that need to be upheld.

Amorality when the group lacks moral standards or concern for others: Problems occur when a professional completely lacks moral concern and rejects any moral position, except for their own gain.

Health professionals have different values and beliefs from each other: Moral problems caused by differences of opinion can occur when health professionals disagree about their values and beliefs towards client/patient care, incidents or situations. These can occur when professions agree that a certain course of action should be followed but their reasoning about the situation is different from each other. An example: they might agree that bed numbers need to be reduced, but their values and beliefs as to why the bed numbers need to be reduced differ.