Nursing Ethics
A Facilitator’s Guide

Dar es Salaam
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Nursing Ethics

A Facilitator’s Guide
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Foreword

The issue of nursing ethics is at the centre of nursing practice and health personnel. Patients and the general community agree about its importance. The problem, however, lies in the proper understanding and application of ethics. It is this problem that makes nurse-patient relationship to often cause complaints and outcries among various health care stakeholders (deterioration of nursing quality).

There has been a need for nurses to be well versed in various aspects of nursing ethics including ethical principles, the right of the patient/client and the nurse, ethical dilemmas, ethical decision making processes, and the nurse’s code of professional conduct.

The study of ethical principles equips nurses with knowledge, skills and attitude of core values in nursing especially compassion, competence and trustworthiness. The knowledge of the nurse’s and the patient’s rights allows the nurses to communicate effectively and maintain good relationship with clients and co workers during their day to day implementation of their duties for provision of quality services. The nurses also need to be able to identify sources of ethical dilemmas and demonstrate ability and skills in solving ethical dilemmas. In training nurses on ethical decision making, we are helping them to develop morally and this in turn, will help them understand the reasons and rationale for actions and decisions taken. On the other hand, understanding of the nurse’s code of professional conduct allows nurses to observe conventional principles and expectations that are binding to all nurses in the country. The nurses should also adhere to other Codes of conduct like, Public Service Code and Leadership Code in order to create more accountability in the provision of quality care services.

The development of this facilitation guide on nursing ethics will help facilitators to equip learners with ethical skills and attitude.

Joyce Safe
Chairperson-TNMC
### Abbreviation

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>APGAR - score</td>
<td>Appearance, Pulse, Grimace, Activity, and Respiration – Score</td>
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<tr>
<td>CD -</td>
<td>Compact Disk</td>
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<tr>
<td>DNA</td>
<td>Deoxyribonucleic Acid</td>
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<tr>
<td>FEAT</td>
<td>Facility for Ethics, Accountability and Transparency</td>
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<tr>
<td>HIV</td>
<td>Human Immunal Deficiency Virus</td>
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<tr>
<td>IMTU</td>
<td>Institute of Medical Technology University</td>
</tr>
<tr>
<td>LCD `</td>
<td>Liquid Crystal Display</td>
</tr>
<tr>
<td>MOHSW</td>
<td>Ministry of Health and Social Welfare</td>
</tr>
<tr>
<td>MUHAS</td>
<td>Muhimbili University of Health and Allied Health Science</td>
</tr>
<tr>
<td>PHNS</td>
<td>Public Health Nursing School</td>
</tr>
<tr>
<td>RCH</td>
<td>Reproductive and Child Health</td>
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<tr>
<td>TANNA</td>
<td>Tanzania National Nurses Association</td>
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<td>TNMC</td>
<td>Tanzania Nurses and Midwives Council</td>
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<tr>
<td>VIPP -Cards</td>
<td>Visualization in Participatory Processes -Cards</td>
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Introduction

Tanzania has decided to give priority to health issues in order to achieve Millennium Development Goals. However, these goals will never be realized if the health of Tanzanians remains poor. It has been realized recently that unethical practice has influenced the quality of health services provided. Due to this fact, the Tanzania Nurses and Midwives Council embarked on a program to improve knowledge of ethics for nurses in Tanzania. Various approaches have been applied including the development of this guide.

The present guide is aimed at assisting the trainer to facilitate the acquisition of knowledge, skills and attitudes in nursing ethics among students and service providers working in the nursing profession.

The general objectives of this guide are to facilitate the learner to:

1. Apply ethical principles when caring for patients/clients
2. Consider patients’/clients’ and nurses’ rights in daily practice
3. Resolve ethical dilemmas in all settings
4. Demonstrate ability to make reasoned ethical decisions in simple and complex situations
5. Practice in accordance with the Code of Professional Conduct

Notwithstanding the fact that “Nursing Ethics” has been, to some extent, handled as a topic in a number of nursing curricula developed in the country, the emphasis of the subject has not been adequate. The development of this guide is, therefore, expected to be the answer to that need.

The guide consists of five units covering the following themes, which include ethical principles, patients’/client’s and nurses’ rights, ethical dilemmas, ethical decision making, and the Professional Code of Conduct. For each of the broad objectives, specific objectives have been developed including methods and content for handling them. The duration for each unit has been suggested and so have the evaluation techniques. Although this guide’s primary target groups are practicing nurses, it is nevertheless useful for pre-service and in-service...
trainee nurses. This may involve modifying the template used in the guide and integrating it in the format of the curriculum.

The guide is accompanied by another document which is a brief handbook on nursing ethics which the trainees will take home as a reference manual. Indeed any practicing nurse will find the handbook a useful reference on ethics.

Throughout this guide, the title nurse is used instead of nurse and midwife for easy reading but does not mean to exclude midwives from this document.

A number of participatory training methods have been suggested for use in various appropriate units of the guide. Generally the methods that will be used in the guide will include:

- Brainstorming
- Lecture discussion
- Role play
- Group work
- Case study
- Simulation
- Testimony/Experiences

The following training materials have been suggested:

- Overhead projector
- Transparencies
- Masking tapes
- Flip chart papers
- Marker pens
- Video projector
- Film/Video or CD Rom

- White/ chalkboard
- Lectures notes
- Flipchart board
- Television
- VIPP Cards
- Laptop and LCD projector
- Material for role plays

The user of this guide, that is, the nurse trainer or facilitator, is advised to note that the training methods are only suggestions, the actual methods that the trainer will require for facilitating a
certain unit will depend on the training environment. This means that the trainer needs to be innovative and should improvise whenever need arises.

The user is requested to provide feedback to the Tanzania Nurses and Midwives Council whenever one comes across something in the guide that needs to be improved.

**Lesson Plan Tips**

It is advised that each time a facilitator leads a session of the unit he/she uses lesson plan tips as a guide whose framework has been presented as annex at the end of this guide.
Unit One
Ethical Principles

Overview
Ethics is, and always has been, an essential component of nursing practice. Ethical principles such as the value of life principle, the principle of goodness or rightness, the principle of justice or fairness, the principle of truth telling or honesty, and the principle of individual freedom are basic to nurse-patient relationship. However, the application of these principles in specific situations is often problematic, since nurses, patients, their family members and other healthcare personnel may disagree about what is the right way to act in a situation. The study of ethical principles equips a nurse with the knowledge, skills and attitude of core values in nursing which serve as a foundation of nursing ethics. This unit therefore aims at providing learners with ethical principles that guide nursing practice.

Unit Objectives
By the end of the unit, the trainee should be able to:
1. Define common terms related to ethical principles
2. Identify the ethical principles in nursing
3. Analyze ethical principles in nursing
4. Apply ethical principles when caring for patients/clients

Time Allocation:        4:00 Hours  -   Classroom
                        12:00 Hours  -   Clinical Practice
                        16:00 Hours  -   Total
Trainer/Trainee Activities

Brain storming

- Ask trainees to explain what they understand by the terms moral, conflict, moral conflict ethics, principles and ethical principles
- Allow several trainees to provide the answers
- Note the answers on a flipchart and lead the whole group to discuss the answers provided
- Generate correct answers from the trainees’ contributions and your own notes.

2. Group discussion

- Organize the trainees into small groups of not more than five participants each.
- Assign the groups the task of describing the ethical principles in nursing and listing them down.
- Let each group present their list in plenary discussion and make sure that each group describes in detail the principles with appropriate examples for clarification.
- Lead the discussion and provide the correct version of the principles by drawing upon what the small groups have presented and from your own notes.

3. Role Play

Let several participants perform the following short scene using the scenario provided below.

A well to do person and a very poor and untidy person come to a health facility for medical care. Demonstrate the way you would care for these two people reflecting the ethical principles in positive and negative aspects.
- Let other participants/trainees observe and jot down in their notebooks whether the ethical principles were applied well in the role play.
- Lead a plenary discussion and draw conclusions.
4. **Case Study**

- Divide participants into groups of five according to the ethical principles
- Assign each group to go to the clinical settings and observe how the ethical principles are applied when caring for patients with various conditions
- Let each group present their observations
- Lead the plenary session and draw conclusions.
Definitions

What is moral?
Related to rightness or wrongness of doing something, good or bad character

What is a conflict?
The following are some of the definitions

- Internal and external discord that results from differences in ideas, values or feelings of two or more people
- Is a part of discord caused by the actual or perceived opposition of needs, values and interests
- A state of disharmony between incompatible or antithetical persons, ideas, or interests; a clash

What is moral conflict?
When you think that some behaviors are right for one reason but you think they are wrong for another reason and you don't know what to do, you are already in moral conflict.

What is Ethics?
The word ethics originated from the Greek word “ethos” meaning customs or character. Ethics is the systematic study of what a persons’ conduct and actions ought to be with regard to himself or her self, other human being, and the environment. It is concerned with judgement about what is right or wrong conduct.

What is a Principle?
A principle is an established rule of action to be followed in implementing a set of activities.

What is Ethical Principle?
- Is a basic concept by which behavior can be judged.
Ethical Principles help people to make decisions, because they serve as a standard with which to measure actions.

- Governing rules of conduct, as Code of Conduct by which life and action can be directed, or as generalization that provide a basis for reasoning.

Types of Ethical Principles
A set of ethical principles often cited in nursing texts are those described by Beuchamp and Childress (1994) in their book *Principles of Biomedical Ethics*. They are so well known that they have been called “The Georgetown Mantra” as the authors were from Georgetown University.

These include the following:

- The principle of respect for autonomy - meaning state of self governance
- The principle of non maleficence - meaning not doing harm to others
- The principle of beneficence - meaning charitable or generous (promote the wellbeing of others)
- The principle of justice - meaning being fair in resource allocation and fairness.

However, these principles were developed for medicine in general rather than nursing in particular. As a result there is another set of ethical principles, which have been set by Thiroux, which although they were set for different settings including education, business and medicine, they are more suited to nursing.

These principles are:

- The value of life principle
- The principle of goodness or rightness
- The principle of justice or fairness
- The principle of truth telling or honesty
- The principle of individual freedom
The Value of Life Principle
This principle requires the nurses to value human life and honor the patients/clients wishes regarding quality of life. It demands the nurse to recognize life as basic and important, but also life should be recognized as having an end. Yet no life should be ended without strong justification such as in the situation whereby life of a pregnant woman is threatened by the presence of the fetus.

In addition, when a nurse is becoming negligent, she threatens the life of the patient; when life of a patient is valued, a nurse will not ignore any instruction on patient’s care. This explains why individuals should never be treated as mere means, but always as unique individuals. When nurses take part in unethical activities such as assisting in abortion, euthanasia, suicide, war or capital punishment, they infringe upon this principle.

Example
When you have to serve a patient who was your former thief, what will be your feelings? Hatred, anger, revenge, anxiousness, wishing the patient death or evil?

The lesson here is that there are desired reactions and undesired ones. One should relate reactions to the value of life. This patient should be treated like any patient even if he was your former thief. You must wish him quick recovery. This is a desired reaction. The hatred, anger and revenge are undesired reactions and should not be allowed to override appropriate nursing action.

Scenario 1:
A person who attempted suicide is brought to the hospital you are working in; will you start blaming him for his attempt on his own life or saving his life right away?

The Principle of Goodness or Rightness
This principle demands that human beings attempt to do three things:

1. Promote goodness over badness (evil) and do good (beneficence)
2. Cause no harm or badness (non-maleficence)
3. Prevent badness or harm (non-maleficence)
Individuals and societies, groups and cultures have different values and ideas of what ‘good’ implies. Certain things, however, seem to be generally recognizable as good. Examples of these things are life, pleasure, happiness, truth, knowledge, beauty, love, friendship, self-expression, freedom, peace, honor and security.

A nurse is obliged to avoid harm or injury/hurt to the patients/clients in all aspects by demonstrating high level of competences in her/his practices. This principle provides justification for condemning any act that unjustly injures a person or causes them to suffer an avoidable harm.

**Scenario 2:**

A nurse on duty is supposed to do such things as taking vital signs, feeding unconscious patients, giving medications appropriately and assessing patients as indicated.

Explain how implementation of these basic functions of a nurse relates with the ethical principle of value of life.

**The Principle of Justice and Fairness**

Issues of justice are increasingly important in health care where dwindling resources force us to make choices that are (or appear to be) not just. The little available must be shared fairly. Distribution of resources should be done without being influenced by the socio-economic position of clients, race, religion or sex.

A nurse who adheres to this principle has the opportunity to utilize the available resources adequately therefore minimize unnecessary complaints from customers, conflicts within working area and creates a sense of commitment and good relationship among staff for the benefits of the patient/client and the organization.

One way that nurses can exercise their responsibilities for allocation of resources is by avoiding wasteful and inefficient practice even when the patient requests for them. Examples of resource allocation include:
- Staff duty allocation
- Use of time
- Use of daily supplies such as gloves, gauze, solution and other materials

In dealing with these allocation issues nurses must not only balance principles of compassion and justice but also which approaches to justice are preferable. These approaches include:

- Utilitarian - Resources should be distributed according to the principle of maximum benefit for all
- Egalitarian - Resources should be distributed strictly according to the need
- Restorative - Resources should be distributed so as to favor the historically disadvantaged
- Libertarian - Resources should be distributed according to market principles (individual choice conditioned by ability and willingness to pay, with limited charity care for the destitute)

**Scenario 3:**

You are in-charge of the hospital where resources are limited but you have few in store and most of the patients are in bed without bed sheets. On the same day you receive a seriously ill patient who is the daughter of the Hospital Medical Officer in-charge. You decide to provide this patient with a new bed sheet from the store and you allocate one nurse to ensure the wellbeing of this patient.

2. What can be done to ensure justice and fairness in a situation like this?

**The Principle of Truth Telling and Honesty (Veracity)**

This is very important for the relationship with clients and colleagues. Without truth-telling, society would not function properly. We go to hospital because we are sure that we shall get treated, and not otherwise. Truth does not merely mean giving information in health care. It means adequate and right information in order for the patient to make a decision. Patients and clients have to rely on professionals to give them information necessary to make their own decisions. Nurses share their knowledge and skills with patients and clients, rather than
impose on them, so that patients and clients can take responsibility for their own care and well-being.

**Example**
A patient came to hospital with uterine fibroid, Doctor promised to remove the fibroid and leave the uterus intact. However, in the process of the operation, he did total hysterectomy without informing the patient. Two years later, the patient learnt at the infertility clinic that her uterus was removed and she can never get pregnancy.

The lesson here is that health workers should be truthful on patient’s condition and outcomes of care.

**Scenario 4:**
You have witnessed a nurse who has given a wrong drug to a patient and shared this information with you. Within few minutes the patient’s condition changes and he collapses. A doctor is called to come and attend the patient but no information is given to the doctor concerning the incidence because nurses thought they would be disciplined.

1. Think about other incidences of a similar situation that you have witnessed during your practice.
2. What do you think are other causes for nurses not to tell the truth and be honest in such situations?

**Scenario 5:**
A nurse who is working in surgical ward gives a patient in pain distilled water instead of prescribed pethedine and hides the drug in her pocket

1. What ethical principle was violated?
2. Is there a need to report or not to report to higher authority?

**The Principle of Individual Freedom (Autonomy)**
This principle is also called the principle of autonomy and it enables a client/patient in making any choice as he wishes. Sometimes freedom is restricted in the interest of the public. In general, we are required to obtain consent because we respect individual’s right to freedom.
An individual has the freedom to make choices about issues that affect him. The concept of autonomy involves: respect, the ability to determine personal goals, the capacity to decide on a plan of action, and the freedom to act on the choice which has been made. It involves consent which in itself is a process whereby patients are informed of possible outcomes, possible alternatives and risks of their treatment. Managing clients without consent will result in non-compliance. Autonomy also values patient’s advance directives.

In some situations, patients are not competent to make decisions themselves. Examples include young children, individuals affected by certain neurological and mental health conditions and those who are temporarily unconscious. These patients require substitute decision-makers, usually a next of kin or significant others.

**Scenario 6:**

A 15 years old girl comes to the Reproductive and Child Health Clinic (RCH) where you are working and requests for oral contraceptives. The next day her mother confronted you for giving her daughter oral contraceptive without her consent.

1. What is your opinion concerning the reaction of that mother?
2. Do you think it was ethically proper for the nurse to offer contraceptives?

**Scenario 7:**

A nurse on night shift decided to force all the bed-ridden patients to take a cold bath very early in the morning before 5 am so that she could leave earlier in the morning. Patients had no alternative except to conform to the nurse’s wishes.

1. What would you do if you were the nurse described in the above example?
2. Was the freedom of the patients considered? Explain

**Evaluation**

Through a question and answer session let the trainees reflect upon the following questions and then provide appropriate answers. You can conduct this assessment verbally:

1. What special things have you learnt in this unit that may bring change in your professional practice?
2. What are your views about the issue of euthanasia?
3. What are your views, as a nurse, on caring for a client who has killed another human being?

4. Mention a list of things that you consider being “good”

5. What do others think about such a list?

6. How are you going to put into practice and emphasize the ethical principles in your hospital or organization?

7. Have you ever experienced as a nurse, examples of injustice? What was involved? Why did you consider it unjust?

8. What do you understand by the concept of informed consent?

9. Mention the limitations on extent of consent obtained from next of kin.
Unit Two
The Rights of the Patient/Client and the Nurse

Overview
The unit will focus on enabling practicing nurses to communicate effectively and maintain good interpersonal relationship with clients and co-workers during their day-to-day implementation of their duties for the provision of quality care and as one aspect of adherence to the Nurses Code of Conduct.

It intends to provide knowledge, skills and attitude to nurses on patients/clients and nurse’s rights. In addition, the unit will enable the nurses to identify culture and values that can influence nursing care delivery.

Unit objectives
By the end of this unit the trainee will be able to:
1. Define the terms “right” “patient” “nurse”
2. Identify patient’s/clients rights
3. Identify nurse’s rights
4. Define “culture” and “values”
5. Identify the culture and values that influence comprehensive health care
6. Demonstrate the application of the patient and nurse’s rights when providing nursing care.

Time Allocation: 3:00 hours - Classroom
6:00 hours - Clinical Practice
9:00 hours - Total hours
Trainer/Trainee Activities

1. Display the learning objectives to the trainees
2. Ask learners to define these terms: clients rights/ patients rights and nurse’s rights
3. Write responses on a flipcharts or chalkboard
4. Ask the learners to buzz into pairs on identifying the rights of clients/patients and nurse’s rights
5. Brainstorming – ask the learners to define “culture” and “values” and to explain core values to be adhered to by nurses.
6. Group work
7. Role play
8. Visit to the clinical to observe whether patients’ and nurses’ rights are observed

Facilitator’s Notes

Definition of Rights
- Conformable to justice, law or morality, (do the right thing and confess)
- Is a privilege or fundamental power to which an individual is entitled unless is revoked by law or given up voluntarily
- Are social, economical or privileges to which some has to claim legally or morally

Definition of a Patient
- Is any person who receives medical attention, care or treatment often ill or injured.

Definition of a nurse
- Is a person who has acquired the expert knowledge base, decision-making skills and clinical competencies for practical practice, the characteristics of which are shaped by context and/or country which she is credentialed to practice.

The Patients/Clients Rights
Any person who seeks health services deserves specific rights, and health workers are obliged to safeguard them. The client has the right to:
- Be treated with compassion, love and respect
- Information about his/her health conditions, prescribed treatment and procedures
- Complain, review and appeal in accordance with established procedures
- Privacy and confidentiality
- Refuse services if they do not meet the required needs and standards
- Access to health services, facilities and information according to their needs
- Informed consent - self-expression and choice of care
- Know hospital rules and regulations apply to his conduct as a patient

**Scenario 8:**

A patient after recovery receives discharge from the doctor. The patient refuses to go home. He wants to stay for his own various reasons including wanting a ceremonious sortie.

Is this the right of this patient? Explain.

**Right to be treated with compassion, love and respect**

Compassion is an emphatic feeling. Longman dictionary of contemporary English (1990) defined compassion as sympathy for suffering of others, causing a desire to help them. It is often characterised through actions, wherein a person acting with compassion will seek to aid those they feel compassionate for.

**Examples**

- A patient with cancer of the oesophagus had no spiritual counselling before. Once a nurse touched, on this aspect the patient said, “Oh yes I really and badly wanted to see a priest”, the priest was called and after a spiritual session the patient died peaceful.
- A young woman had her first delivery in nearby hospital. The abusive language she underwent from the nurses made her decide never to deliver in that health facility again. Instead, she had her second and third deliveries at another health facility where she claimed there was more compassion. Some patients prefer to go to certain hospitals because they believe there is more compassion.
- When a nurse verbally assault a patient on traction who ask for a bedpan during ward rounds
- When some nurses order patients like in a military parade, by saying for example: “All bed sheets down”
- When student nurses provide proper care in the ward only for practical examination purposes

**Scenario 9:**

A patient who is confined to bed, with a big septic wound, needs dressing twice per day. Because of severe sepsis, nurses avoid the patient; they do not dress the wound as required. Due to poor dressing, the wound smells offensively, with many houseflies around the patient, and the patient fails to take meals due to lack of appetite caused by smelling wound.

1. As a nurse of the ward, what measures are you going to take to ensure that patients / clients know their rights?
2. What patients’ rights were violated in this scenario?

**Right to Information**

**Definition of information**

Is something, which gives knowledge in the form of facts and news.

The patient has the right to receive adequate and appropriate information about any proposed treatment or procedure as the patient may need to give informed consent or to refuse the course of treatment.

The patients/clients right to information and participation in nursing care has led to conflicts in the areas of informed consent and access to medical records. For example, when a patient is asked to sign a document that he/she has not read, can not read or could not understand it. See scenario 4 and 5 under Chapter One (Truth Telling)
Scenario 10:

Mrs M and her family were involved in a motor accident whereby her husband and her two children died on the spot. Mrs. M was brought to the hospital unconscious with head injury. After gaining consciousness, she kept on asking for her husband and her two children. The nurse made up a story to conceal the fact fearing that by telling her the truth might result in upsetting her emotions and worsen her condition.

Was the nurse doing right by concealing the truth to the patient? Explain.

Right to Privacy

Definition of Privacy
The desirable state of being away from other people so that they cannot see or hear what you are doing. Refers to ones ownership of ones body or information about oneself

Right to privacy is important in order to establish communication and trusting relationship so that the person is able to submit his/her body during nursing care

Privacy for patient’s body, information and their hospital documents is one of the observed human rights when providing care. Nurses should safeguard patient’s privacy in order to maintain his/her human dignity.

Scenario 11:

A nurse conducting deliveries in labour ward where there are six beds, six mothers without partitions or screens between the beds.

What challenges will you face as a nurse while giving care to these mothers?
Right to Confidentiality

Definition of Confidentiality
Ensuring that information will not be made public and will be accessible only to those authorised to have access. Confidentiality is one of the cornerstones of information security.

Patients give confidential information to nurses voluntarily believing that it will help in their receiving correct diagnoses and appropriate treatment. We observe confidentiality because we respect our clients and their autonomy and it is the essential element of building trust in relationships.

The nurses’ duty is to maintain confidential information revealed to them by their patients/clients and shall not disclose the information to unauthorised people. However, in the process of caring for patients, nurses shall share this information with other members of health-care team for continuity of care.

Right to Self Determination (Consent)
All procedures in health require patient’s consent as an indication for acceptance to what is planned for him/her, except in the event of an emergency where there is a need to save life or to prevent more harm. You may proceed to give services without waiting for the consent. In the event that the client is unconscious, has mental illness or is below age, such a patient needs somebody else, such as a spouse, to give permission on his/her behalf as he/she cannot sign the consent about the procedure. The consent can be given in writing or verbally.

Example
A patient comes to hospital with an obstructed labour and refuses to be operated saying “I cannot undergo this because I believe I will deliver in a normal way”. She was not operated immediately as a result when she agreed the child was born with low APGAR score.

The lesson here is that we must respect patient’s directive (consent). On the other hand, this can delay an urgent operation. In observing this principle, nurses shall observe the following:
1. The patient has the right to self-determination, to make free decision regarding him/her
2. The patient has the right to information necessary to make her decisions
3. Patients with sound minds have the right to refuse treatment, even when the refusal will result in disability or death
4. Advance directives issued by the patient should be respected
5. The nurse has no obligation to offer a patient futile or non beneficial treatment

The Nurse’s Rights
The nurse is required to give caring service of high quality to others and to derive job satisfaction in the workplace. In turn, she should also receive a measure of caring from colleagues, the public, employers and clients. Together with the Universal Declaration of Human Rights, the nurse has right to:

- Recognition of their competence and potential as well as respect for their human action. Nurses need to have an active “Nurses Day”, or actively participate in “important” days. This will positively publicise the profession. The Nurses Council, TANNA etc. should assert themselves on behalf of nurses and to fight anti-nurse campaigns, cartoons, etc in the media.
- Advancement: Nurses have the right to professional development. Advancement should start with qualifications for recruitment. People with high marks should be recruited for nurse training. Nurse training should not be a dumping place for those with lowest academic qualifications. Nurse teachers should play a role in ensuring this.
- Practice in an environment that allow them to act in accordance with professional standards and authorised scopes of practice
- Practice in a manner that fulfils their obligation to society and to those who receive nursing care
- Work in an environment that supports and facilitates ethical practice in accordance with Code of Professional Conduct for nurses and its interpretive statement
- Negotiate the condition of their employment, either as individuals or collectively in all practice setting.
- Work environment that is safe to herself/himself and to her/his patients
- Fair compensation for her/his work consistent with their knowledge, experience and professional responsibility
- Freely advocate for themselves and their patients/clients.
- Get rest, leisure time and family life.

**Role plays scenarios illustrating Nurses rights**

**A Nurse**

Nurse X, is a diploma nurse who is working in an intensive care unit for 6 years. She feels that in order to execute high quality care, she need to advance herself further by enrolling in a degree program. She applies to the university and get accepted. She writes a letter to the employer in order to be released for her studies.

**Employer**

Reads the letter, bangs the table and says” What is this” nonsense? “A nurse for a degree?” No way. He calls the nurse and tells her that permission is not granted for her to go for the studies.

**Participants**

Observe and jot down

1. What right has the nurse been denied?
2. What further action should the nurse take to get her right?
3. What is the best way of dealing with such employer?

**Culture and Values in Nursing**

**Definition of Culture**

Culture is defined as a belief, value, norms and customs of a specific group.

We must be culturally sensitive when rendering services. Cultural sensitivity is the ability to incorporate the patient’s cultural perspective when assessing the situation and hence modifying nursing care in order to match with the patient’s culture.
Each culture understands life process differently. If we ignore the patient’s culture we may find ourselves labelling the patient as being uncooperative or strange.

Culture may influence individual feelings and the way to express those feelings. For example in pain some keep quiet, others shout or cry.

**The Implication of Culture in Rendering Services**

Culture is a design for living. It provides a set of norms and values that offer stability and security for the society and plays major roles in motivating behaviours. The variety of cultural groups in our society reinforces the need for the nurses to understand and appreciate cultural diversity.

The nursing profession has a duty to train practitioners to provide care which is meaningful and sensitive to the needs of patients of all cultures. It is important that a nurse who works with patients of other cultures should carefully consider the following aspects:

- Recognition of her own cultural orientation, meaning that there is need for nurses to analyse their own beliefs which may influence their willingness to care for other people.
- Understanding of the importance of the patients perspectives in that it enables the nurse to identify differences and then to find ways of working with such differences.
- Development of communication skills in order to examine the patients’ perspectives. The nurse cannot identify a patient perspectives or involve the patient in a discussion if for some reasons is unable to communicate effectively.
- Identification of issues and factors which influence provision of care to people of other cultures is an important aspect in provision of effective nursing care.

*Example*

Many cultures have specific customs relating to the death of the family member. This could give the nurse an indication of how she spends time with the dying person, the care of the body after death and the patterns of mourning.
Secondly: many cultures have specific customs relating to childbirth for examples in some cultures male nurses are not accepted to assist a woman in labour. If a nurse who is nursing a patient with specific cultural customs is sensitive to these customs, it will be of great value to the patient.

**Scenario 12:**

One day while you were working in a busy medical ward, in one of the single rooms, there was Mrs X, confined to bed critically ill. Her husband, Mr. X, felt uneasy and restless at home and he decided to come and see his wife. At 10.30 am, you received a telephone call from the gatekeeper asking you to allow Mr X to see his wife. You refused because the hospital policy does not allow visiting patients at that particular time. Visiting time is from 12.30 p.m.

Again, at 11.00 am, the gatekeeper called back and pleaded you to talk with Mr X as he insisted to be allowed to see his wife; you agreed to talk to him. The husband insisted that according to their customs it was important to discuss some issues with his wife before she dies, but you refused to allow him insisting to adhere to hospital policy. At 12.00 noon, Mrs X’s condition changed and she died before speaking to her husband.

1. What do you think about the policy and the nurse’s decision?
2. What could be done to ensure culture and values of individual patient/client are respected within the nursing practice?

**Values**

**Definitions of Values**

They are particular characteristics or qualities, which single out a person, department, an institution, or an organisation to be recognised as it is.

Or

Value is something that is perceived as desirable or ‘the way things ought to be’ (Ellis & Hartley, 2000; Husted & Husted, 2001).
Values are lasting beliefs that are important to individuals, groups and cultures; hence they strongly influence nursing care. Often the nurse is faced with making decisions that affect clients’ values and involve conflicting moral values and ethical dilemmas. Understanding what personal values are and how they affect behaviour assists in delivering quality nursing care.

The core values which are expected to be adhered by nurses in Tanzania are as follows:

- Diligence to duty
- Maintaining and ensuring Excellency
- Loyalty to authority in general
- Abide to other relevant codes of conduct, for example, the Public Service Code of Conduct.
- Integrity
- Courtesy to clients
- Respect for the law
- Proper use of official information
- Team work spirit
- Compassion

**Core Management Values are**

- Impartiality in service provision
- Provision of quality services
- Ethical conduct
- Equity in access to health services
- Client confidentiality and privacy
- Respect for colleagues and clients
- Individual right to health care
- Affordability of care
- Partnership in health care provision

**Evaluation**

Has the culture of your patient ever posed a challenge to you when exercising ethical principles in your nursing practice? How?
Unit Three
Ethical Dilemmas in Nursing

Unit Overview
This unit will enable the trainee to define and identify ethical dilemmas. The trainee will also be able to identify sources of ethical dilemmas and demonstrate ability and skills in solving ethical dilemmas using critical thinking.

Unit Objectives
By the end of this unit, the trainee should be able to:

1. Define the term ethical dilemmas
2. Explain common ethical dilemmas
3. Identify sources of ethical dilemmas
4. Demonstrate ability and skills in solving ethical dilemmas
5. Apply strategies used to solve ethical dilemmas

Time Allocation: 4.00 Hours - Classroom

8:00 Hours - Clinical Practice

12:00 Hours - Total
Trainer/Trainee Activities

1. **Brain Storming**
   i. Ask the trainees to explain what they understand about dilemmas and ethical dilemmas and their sources.
   ii. Allow several trainees to provide answers.
   iii. Note their answers on flip chart and lead a plenary discussion on the answers given until some consensus is reached.
   iv. Build the correct answers from the learners’ contributions and your own definition, which you can obtain from “facilitator’s Notes” provided for you.

2. **Provide a scenario on ethical dilemma**
   i. Let the trainees work in small groups and identify ethical dilemmas from the scenario and discussions.
   ii. Let each group present their list for plenary discussion. Lead the groups to discuss presentations and provide the correct ethical dilemmas in relation to the scenario.

3. **Role plays**
   An elderly woman patient prefers to die rather than live with deteriorating effects, intolerable pain and a slow death associated with incurable disease. Her husband implores nurses to provide care that will help his wife continue living. Let the trainees role-play the way they would assist this couple.
   a. Assign several trainees to role play on how moral decision is carried out in solving the above problem.
   b. Let other trainees observe and jot down whether the ethical dilemma approaches were applied
   c. Lead a plenary discussion
   d. Draw conclusion and clarify gaps.
Facilitator’s Notes

**Definition of Ethical Dilemma**

1. Ethical dilemma is defined as a situation having two or more undesirable alternatives (Butts and Rich 2005)
2. Ethical dilemma is a perplexing problem that offers a choice between equally unsatisfactory alternatives (Marquis & Huston 2003).

**Characteristics of Ethical Dilemmas**

In order for a problem to be an ethical dilemma it must have three characteristics as follows:

1. The problem cannot be solved using only empirical data. (empirical data is information derived from observation/experiences)
2. The problem must be so perplexing that deciding what facts and data need to be used in making decision is difficult.
3. The results of the problem must affect more than the immediate situation; and there should be far reaching effects.

**Common Ethical Dilemmas**

Ethical dilemmas in nursing can be classified as follows:-

1. **Dilemmas of beneficence** – It involves deciding what is good as opposed to what is harmful. Dilemmas often occur when a nurse, patients, or family members disagree about what course of action is in the best interest of the patient.

2. **Dilemmas of non-maleficence** - It involves the avoidance of harm. These issues often involve a nurse’s responsibility to “blow the whistle” if she sees others compromising the patient’s safety. In these situations, a nurse notifies higher authorities on weaknesses in the care they provide by not following established communication channels.

3. **Dilemmas of autonomy** – It involves deciding what course of action maximizes the patient’s right of self-determination. Autonomy issues are related to beneficence issues, especially when individuals other than the patient must determine what is best for the patient.
4. **Dilemmas of justice** – It involves issues of fairness and equality, such as dilemmas that involve dividing limited health care resources fairly.

5. **Dilemmas of Fidelity** - It involves issues that involve honouring promises. These may include the extent and limits of a nurse’s role and duties to patient that might conflict with other duties such as duties of the physician.

6. **Dilemmas of Veracity** - This is an obligation to be truthful to patients and to cultivate their understanding of relevant consideration. The dilemma arises when telling the truth might cause suffering to the patient.

**Sources of Ethical dilemmas**

Problems arise when one or more ethical principles conflict with each other.

1. Patients and nurses – For example human rights are involved when a patient refuses to commit herself in signing consent while the nurse believes it is ethically appropriate to get his/ her permission.

2. The value system, beliefs and culture – For example a patient who belongs to Jehovah’s Witnesses refuses blood transfusion at the time when blood will save the life of that individual.

3. Dilemma may arise from justice and conflicts between nurses and other health care professionals, health care organizations, administrators or patients and family members.

   Example 1: Quick service provided to patients who can pay extra money
              Leaving patients with low economical status to wait.

   Example 2: Family members may demand the HIV results of a patient and create a difficult situation.

   Example 3: A woman may demand abortion for her school age girl who has been raped by a school teacher.
4. Technology advancement: Knowledge among people is growing and patients may come to the hospital with full information of their expectations including services like DNA, such as when the nurse is asked to prepare a child for tests to confirm if the claimed father is a true father of the child or not. Technological advancement provides challenges when we are required to extend life support services for terminally sick patients and simplifies accessibility to information.

**Strategies Used to Solve Ethical Dilemmas**

There are no clear ways of solving the dilemmas. Different strategies and ways need to be applied in solving the dilemma as described below.

First the nurse defines her obligations, to patients and fellow employees which helped her to analyze ethical conflicts. She notes that six steps proved useful to define those obligations:-

1) To maximize a patient’s wellbeing.
2) To balance the patient’s needs for autonomy and, in the case of a minor, his/her parents’ responsibilities for his or her wellbeing.
3) To support each family member and enhance the family support system.
4) To carry out the hospital’s policies.
5) To protect the other patients’ good.
6) To protect his or her own standards of care.

After examining one’s obligations, it is usually recommended that four additional steps should be taken:-

1) Collect as much information as possible about the patient and other significant persons in the situation.
2) Describe probable consequences of each of the courses of action being considered, for the patient and the significant others in the situations.
3) Consider who should make the final decision in the matter.
4) Consult other health practitioners, especially those who are prepared by practice, ethical committee and education to contribute meaningfully to solving problems of an ethical nature.
Even after taking the steps described above, solutions may not necessarily be forthcoming when ethical conflicts are present.

Commitment to ethical standards of practice is an essential part of nursing, as is the commitment to respect the rights and dignity of the person receiving care.

**Evaluation**

Through question and answer session, the trainees reflect upon the following questions and then provide appropriate answers. You can conduct this assessment verbally.

1. What is an ethical dilemma?
2. What makes you decide that this is a dilemma?
3. What ethical dilemmas are common in your clinical area and how did you solve them?
4. Mention some sources of ethical dilemmas
5. What strategies can you use to solve ethical dilemma in nursing?
Unit Four
Ethical Decision Making Process

Unit Overview
This topic on ethical decision-making introduces the nurse to moral development process, which is considered with the reasons for actions and decisions. Ethical problems, like other kinds of problems, can be approached using a systematic decision making process that involves five steps.

Unit Objectives
By the end of the unit, the trainee should be able to:-

1. Define ethical problem and ethical decision making process
2. Analyze the steps involved in ethical/moral decision making
3. Apply the relevant decision-making strategies that can be utilized in working environment

Time Allocation

<table>
<thead>
<tr>
<th>Hours</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.00</td>
<td>Classroom</td>
</tr>
<tr>
<td>8.00</td>
<td>Clinical Practice</td>
</tr>
<tr>
<td>12.00</td>
<td>Total hours</td>
</tr>
</tbody>
</table>
Trainer/Trainee Activities

1. Introduce the topic first by reviewing with learners the previous learning by asking the following questions:
   - What are ethical principles?
   - Give three examples of ethical principles in nursing

2. Display objectives and ask one learner to read them and then explain them to the learners

3. Through brainstorming, ask trainees to explain what they understand by the term “ethical problem”. Discuss the answers with them and arrive at an agreed definition.

4. Design a role-play portraying how moral decision is carried out to encounter ethical problems at working place
   a. Set a situation that requires ethical decision making
   b. Assign roles to trainees i.e. role play actors and role play supervisor
   c. Instruct other trainees to observe the role play
   d. After the role play, the role play supervisor who is among the trainees, leads a discussion
   e. Summarize the role play
Facilitator’s Notes

Definition of Terms:

**Ethics**
- Is a system of moral principles or standards governing conduct
- The study of morality/ careful and systematic reflection on and analysis of moral decision and behaviour

**Ethical Decision Making**
Is the process of using all the available information about an ethical situation and arriving at a solution (or at solutions) concerning that situation

**Problem**
A problem can be defined as an un-met need, or an unresolved conflict or a discrepancy between need and what is available

**Process of Ethical Decision Making**
The process of ethical decision-making is based on the following steps:
1. Assessing the situation
2. Defining the moral problem
3. Identifying the objective to be achieved
4. Listing the alternatives and implementing plan of action
5. Evaluating the moral outcomes

**Assessing the Situation**
- Obtain all relevant facts
- Clarify conditions which prevail in different circumstances in the nursing environment e.g. community or institutional
- Identify the real needs of the client/patient, resources available and what is actually possible
Defining or Identifying the Ethical Problem

Decide category of the problem whether ethical or not in terms of knowledge and skills in deciding what should be clarified. This includes relevant rules and principles relating to personal and professional nursing duties.

Setting Ethical objectives and Planning on Appropriate Course of Action

- Consider specific knowledge and practical procedures relevant to the problem
- Examine past experience for dealing with similar problems
- Choose appropriate means to achieve desired goals
- Formulate a plan of action including contingency plans should things go wrong.

Listing the alternatives and implementing the Plan of Action

Implementation will depend on the problems identified by going through the whole process:

- Identifying efficiency and effectiveness of the plan
- Reporting the matter to the supervisor or manager
- Seeking involvement of an institutional ethics committee for advice

Evaluating the Moral Outcomes of the Actions

- Assess whether the desired moral outcomes of the actions taken were achieved
- If it proves negative the whole situation needs to be re-planned (re-appraised)
- Evaluation is also concerned both with judgement on how well individual steps in the process have been completed and how successful the whole process has been in practical and moral terms.

Ethical framework for Decision Making

Common Ethical frameworks for decision-making according to (Marquis & Huston, 1998) are:

1. Utilitarianism
2. Duty-based reasoning
3. Rights-based reasoning
4. Intuitionism
**Utilitarianism**

This framework encourages the manager to make decisions based on what provides the greatest good for the greatest number of people. Example, a manager using this principle might decide to use money allocated for domestic training to send many staff to attend training within their locality rather than to fund one or two to attend an international conference.

**Example**

An institution was given money for buying material for staff uniforms; the head of the institution decided to use the money to train on infection prevention to a large number of staff, as this will help to protect the patient and the health providers instead of buying material, which was not an urgent need at that time.

**Duty Based Reasoning.**

This framework says some decisions must be made because there is a duty of doing something.

**Examples**

- The manager feels a duty to hire the most qualified person in nursing ethics to teach ethics in nursing even if the personal cost is high.
- A nurse recommends buying a 3 x 6 ft. bed in stead of 6x6 to maximize the utility of the room.
- A nurse recommends to be provided with chlorine powder instead of liquid chlorine so that she can use it for longer period.
- A Matron decides to purchase an autoclave which costs TShs. 3,000,000/- and is durable than an autoclave which costs TShs. 500,000/-. The latter may not be durable.
- The Hospital Management found out that neonatal deaths were increasing day by day. Research was conducted to find out what could be the cause. After 3 months, they found out that staffs were using hand washing solution (disinfectant) of 10% (low quality) they decided to change to 50%. The ward manager was told to order 50% solution. She did not agree to the decision; she continued to order 10%. The Manager decided to order 50% solution and stocked in the Neonatal Unit for use. After 3 months the rate of deaths was reduced.
The Manager of Hospital X received complaints from the staff complaining about salary deduction. The Manager decided to call one person from Revenue Authority to explain about it and the staff understood. They are now working comfortably.

**Rights-based reasoning**
This framework is based on the belief that some things given to a person is just due (entitlement) Look at these examples:

- A manager allocates a house to an entitled officer rather than eligible officer.
- A Matron allocates a nurse with advanced diploma as an in charge instead of a nurse with a certificate.

**Examples**
- In hospital Y, 8 nurses went for Advanced Diploma School, 4 for Mental Health including Psychiatry, 2 for Ophthalmic Nursing and 2 for Paediatric Nursing. After completing training the Nursing Officer In-Charge allocated them in their areas of specialty. Four were placed in Psychiatric Unit, 2 at Eye Clinic and 2 in Paediatric Ward.
- A five year old child was admitted in a Paediatric Ward with severe dyspnoea, cough cyanosis and high fever. He was diagnosed as having severe pneumonia. The doctor prescribed oxygen therapy immediately with other therapies. The mother was informed about the oxygen therapy but she refused believing that oxygen therapy kills. The nurse decided to administer oxygen to the sick child with other therapies.

**Intuitionist**
This framework allows the decision maker to review each ethical problem or issue on a case by case, basis comparing the relative weight of goals, duties and rights. This is what the decision maker believes what is right at that particular situation.

**Examples**
- A nurse allocates a bed for a seriously ill patient instead of putting him on the floor.
- A nurse should not agree to a mother’s request of seeking abortion for her daughter.
- A nurse would not agree to refusal of blood transfusion due to religious belief.
Evaluation

Ask trainees the following questions to check their understanding of the Unit.

(i) What do you understand by the word “problem”?
(ii) What is “ethical decision making”?
(iii) What is “ethics”?
(iv) Explain the “ethical decision making process”
(v) What are the problems associated with making an ethical decision? Give examples from your daily professional practice.
Unit Overview
The code of professional conduct for nurses sets out conventional principles and expectations that will be binding to all nurses in the country. Its purpose is to inform the professional nurses, employers, other health professionals and the public on the standard of professional conduct expected from a nurse. This code of profession conduct shall apply to all nurses in both public and private sectors.

Unit Objectives
By the end of the unit the trainee should be able to:

2. Identify the purposes of the Code of Professional Conduct for Nurses and Midwives in Tanzania
3. Describe the guiding principles utilized when caring for clients/patients
4. Discuss other relevant code of conducts such as the Code of Conduct for Public Servant
5. Discuss the Nurse’s Pledge

Time Allocation:
4:00 Hours - Classroom
8:00 Hours - Clinical Practice
12:00 Hours - Total
Trainer/Learner Activities

1. Allow trainees to buzz on what they understand by the terms code, conduct, code of ethics, code of conduct, pledge and solemn

2. Clarify what the code is and discuss its purposes

3. Give an overview of the code of professional conduct for nurses

4. Give an overview of other relevant codes of conduct such as the Public Servants Code of Conduct in Tanzania.

5. Divide trainees into small working groups to describe guiding principles when caring for their clients/patients

6. Let the trainees present group work to the plenary for discussion.

7. Summarize the topic by giving the right answers.
Facilitator’s Notes

Definitions

*Code*
Is an authoritative system of written rules, which are analogy (similar) to law and are binding and formulated to regulate behaviour.

*Code of Ethics*
Is a formal statement by a group that is established and prescribes moral standards and behaviours of the group.

*Code of Conduct*
Is a social instrument which provides a framework that defines the core value and standards which a professional must follow.

*Pledge*
Is a solemn promise or a vow

*Solemn*
Means serious

Thus *the code of conduct* for nurses is a statement that guides nurses and midwives in all aspects of professional practice in nursing. This code complements the existing laws, regulations, guidelines and standards that guide nurses in practice.

*Code of Professional Conduct for Nurses*
It is a statement to guide nurses and midwives in Tanzania for their legal and ethical practice. This code, adapted by the Tanzania Nurses and Midwives Council (TNMC) from the Professional Code of Ethics produced by the Ministry of Health in 2002.
Purposes of the Code

1. To guide the professional nurses in providing compassionate care and love to the patient/clients so as to attain acceptable standards such as respect for human dignity and the uniqueness of the client.

2. To guide the professionals in the ever-changing world of education, practice, research, leadership and management. For example, the nurse should participate in activities that contribute to the ongoing development of the profession’s body of knowledge.

3. Enables nurses and midwives to make decision on patient care approaches.

Guiding principles

As a nurse licensed to practice by TNMC, you are personally accountable for your practice. The following are the principles to follow when caring for patients:

1. **Respect for humankind and the patient/client as an individual.**
   - The nurse provides services with respect for human life and dignity.

2. **Obtain consent before providing care**
   - Obtain patient’s valid consent for care receiving, respect his/her autonomy.

3. **Maintain professional competence**
   - Nurses must strive at all times to achieve and maintain high professional standards in providing quality care through evidence based practice to safeguard the safety of the client/patient.

4. **Take responsibility and be accountable for your acts**
   - Every nurse should be responsible and accountable for his nursing judgement and actions.

5. **Be trustworthy and exercise fairness**
   - Every nurse has the duty to behave in the way that uphold good reputation of the profession, has to be fair in distributing resources and at all times to tell the truth and be loyal in whatever form.
6. **Collaborate with others and act as part of the team**
   The nurse collaborates with other members of the health team and other sectors in promoting health needs of the clients and the public at large.

7. **Protect confidential information**
   Information about patient and clients must be treated as confidential and be used for the purposes for which it was given. As it is impractical to obtain consent every time you need to share information with others, you should ensure that patients and clients understand that some information may be made available to other members of the team involved in the delivery of care.

8. **Always the nurse safeguards the client’s right to privacy**
   Respect the privacy of a patient/client in such a way that during the procedure, privacy is provided and maintained throughout.

**Discuss the Nurse’s Pledge**
1. What does the nursing pledge mean to you?
2. Explain the key issues addressed in the nursing pledge
3. What are the implications of nursing pledge to a nurse?

**Evaluation**
Through an assignment let the trainees reflect into general practice and answer the following questions:
1. Explain the guiding principles utilized when providing care to your clients to ensure quality of care
2. What is your response to a nurse who cares for the patient without following the guiding principles
3. Outline lists of complaints that you have encountered due to non adherence to the set principles
References


LESSON PLAN TIPS

The lesson plan provides guidance on how to conduct a training session using the seven experiential learning steps. The steps are as follows:

1.0 **Climate Setting**
   This is an introduction to the session. The facilitator can provide a brief story, a reminder about the last session etc. Climate setting should last between 5 and 10 minutes.

2.0 **Displaying Objectives**
   The facilitator will then discuss the session objectives and clarify them. Discussion of objectives will last 10 to 20 minutes.

3.0 **Experience**
   This is the main part of the session. It is here that the facilitator actually passes on knowledge, skills and attitudes to the trainee. It is here that trainer – trainee activities are conducted using various training methods. The longest time of the session is spent at this step. The actual duration will depend on the method(s) used.

4.0 **Processing**
   During this step the facilitator wants to know how the trainees react to the whole session. He normally asks participants, “How do you feel after this session?” It takes normally 5 minutes

5.0 **Generalisation**
   The facilitator here asks what trainees have learnt in the session. The step lasts about 15 minutes

6.0 **Application**
The facilitator here normally asks the question, where and how are you going to apply what you have learnt in this session. The step lasts about 15 minutes.

7.0 **Summary and Closure**

The facilitator during this step takes the trainees back to the objectives and together they ask themselves if they have achieved each of the objectives. The facilitator then thanks the trainees and closes the session. The step lasts about 20 minutes.