

Ethical and Legal Issues in Healthcare Curriculum



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About the Author



Krista Wenz has been a Licensed Paramedic for 34 years. She holds a Bachelor's Degree in Fire Safety Management and worked 23 years as a Firefighter-Paramedic for a large Metropolitan Fire Department in California. Krista has extensive knowledge in Emergency Medicine, including experience as an Adjunct Instructor at community and private colleges teaching EMT and Paramedic students. She has additional experience working as a Mental Health Technician in a psychiatric ward and emergency crises, Drill-Instructor and Field Training Officer for multiple agencies, CPR, First-Aid, PALS, BLS, and ALS instructor, and EMS Captain for a rural Fire Department. Now retired from the Fire Service, Krista is passionate about passing on knowledge and experience for those interested in entering the healthcare field.

Curriculum Structure

Ethical and Legal Issues in Healthcare curriculum is composed of the following lessons. Approximate lesson times are included.

Lesson	Title	Approximate Time
1	Legal Responsibilities and Implications	60 minutes
2	Patient's Basic Rights and Responsibilities	60 minutes
3	Informed and Implied Consent and Advance Directives	60 minutes
4	Safety, Privacy, and Confidentiality of Health Information	60 minutes
5	Social Media and Healthcare	60 minutes
6	Ethical Foundations	60 minutes
7	Ethical vs. Legal Issues Impacting Healthcare	60 minutes
8	Contemporary Ethical Dilemmas and Their Implications	60 minutes
9	Religious/Cultural Values and Respect/ Empathy for all Patients	60 minutes
10	Ethical Issues Involving Lack of Capacity and End-of-Life Care	60 minutes

Lesson Structure

Each lesson begins with a Lesson Overview, Lesson Objectives, and a Lesson at a Glance table that lists the lesson activities, materials required, suggested preparation steps, and approximate class time.

Lesson Sections

The actual lesson follows the overview, which will contain some of the sections described below.

FOCUS

Every lesson begins with a FOCUS activity intended to capture participants' attention. This may be in the form of a small or large class discussion, a game, a review of previous lesson information, or a demonstration. During this activity, participants are introduced to the topic of the lesson.

LEARN

The LEARN activity in each lesson varies in its presentation mode. It may be a slide presentation, group activity, or demonstration.

REVIEW

The majority of lessons end with a REVIEW activity intended to briefly review the lesson's key messages or main points.

Lesson One – Legal Responsibilities and Implications

Lesson Overview

In this lesson, participants will learn about legal and ethical responsibilities and implications for healthcare professionals. Participants will learn about the scope of practice healthcare professionals follow, and how to minimize civil or criminal charges being brought against them.

Lesson Objectives

After completing this lesson, participants will be able to:

- Differentiate between civil and criminal law
- Describe healthcare professional's legal and ethical responsibilities
- Define "scope of practice"
- Define the healthcare professional's legal responsibilities and the implications of criminal and civil law as it applies to eight charges that could be brought against them

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Legal Responsibilities and Implications (Focus on Empathy)</i> worksheet • <i>Legal Responsibilities and Implications (Focus on Empathy)</i> Instructor Resource • <i>Legal Responsibilities and Implications Pre-Test</i> • <i>Legal Responsibilities and Implications Pre-Test – Answer Key</i>	1. Print/photocopy <i>Legal Responsibilities and Implications (Focus on Empathy)</i> worksheet (one per participant) 2. Print/photocopy <i>Legal Responsibilities and Implications Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Legal Responsibilities and Implications</i> slide presentation • <i>Legal Responsibilities and Implications Presentation Guide</i> • <i>Legal Responsibilities and Implications Presentation Guide – Answer Key</i>	1. Prepare <i>Legal Responsibilities and Implications</i> slide presentation for viewing 2. Print/photocopy the <i>Legal Responsibilities and Implications Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• Ethical and Legal Issues in Healthcare Student Workbook • <i>Legal Responsibilities and Implications Post-Test</i> • <i>Legal Responsibilities and Implications Post-Test – Answer Key</i>	1. Print/photocopy the <i>Legal Responsibilities and Implications Post-Test</i> (one per participant)	20 minutes

Lesson One – Legal Responsibilities and Implications

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Legal Responsibilities and Implications (Focus on Empathy) worksheet*
- *Legal Responsibilities and Implications (Focus on Empathy) Instructor Resource*
- *Legal Responsibilities and Implications Pre-Test*
- *Legal Responsibilities and Implications Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Legal Responsibilities and Implications (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Legal Responsibilities and Implications (Focus on Empathy) Instructor Resource* available.
3. Distribute the *Legal Responsibilities and Implications Pre-Test*.
4. Have the *Legal Responsibilities and Implications Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Legal Responsibilities and Implications (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

You are starting your morning shift as a CNA at a residential facility for dementia patients. You are looking for Ron, the CNA you will be relieving. As you approach one of his patient's rooms, you hear Ron talking to his patient Lilly very loudly and in an angry tone. "Lilly, why can't you be a good girl and take your meds? Why do you always have to be so difficult?" You push open the door and Ron's back is to you. You see him throw the medications and a cup of water at Lilly's face as he turns around to leave the room. He sees you and storms out of the room, shaking his head.

REFLECT on the situation:

What would you immediately do in this situation?

I would introduce myself to Lilly and help clean up the medications and water while reassuring her and checking for injuries. I would then immediately contact the nursing supervisor for guidance and follow mandatory reporting requirements.

What emotions do you think Lilly is feeling?

It's hard to understand how a patient with dementia is feeling at any given moment. Nevertheless, I would assume that Lilly is feeling scared, alone, and helpless in this situation.

What emotions would you be feeling in this situation?

I would be feeling empathetic towards Lilly and angry and frustrated with Ron.

What types of violations could Ron possibly be charged with, depending on state laws?

Depending on the state laws, Ron could possibly be charged with assault, abuse, battery, or negligence.

SHARE your thoughts with a peer when it's discussion time.

Legal Responsibilities and Implications (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

You are starting your morning shift as a CNA at a residential facility for dementia patients. You are looking for Ron, the CNA you will be relieving. As you approach one of his patient's rooms, you hear Ron talking to his patient Lilly very loudly and in an angry tone. "Lilly, why can't you be a good girl and take your meds? Why do you always have to be so difficult?" You push open the door and Ron's back is to you. You see him throw the medications and a cup of water at Lilly's face as he turns around to leave the room. He sees you and storms out of the room, shaking his head.

REFLECT on the situation:

What would you immediately do in this situation?

What emotions do you think Lilly is feeling?

What emotions would you be feeling in this situation?

What types of violations could Ron possibly be charged with, depending on state laws?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Legal Responsibilities and Implications Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is considered the most harmful form of defamation?
 - a. Slander
 - b. Battery
 - c. Libel
 - d. Malpractice
2. "A threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening manner." What is this the definition of?
 - a. Assault
 - b. Battery
 - c. Abuse
 - d. Negligence
3. Which of the following does **not** need to be proven to be charged with slander?
 - a. The statement was false
 - b. The person speaking was underprivileged
 - c. The person acted negligently when speaking
 - d. The statement was not privileged
4. As a healthcare professional, following legal responsibilities protects you, your employer, and _____.
 - a. The public
 - b. The patient's family
 - c. Your colleagues
 - d. The patient
5. What type of "code of conduct" is based on morals and society's expectations?
 - a. Ethical
 - b. Moral
 - c. Civil
 - d. Legal

Legal Responsibilities and Implications Pre-Test – Answer Key

1. Which of these is considered the most harmful form of defamation?
 - a. Slander
 - b. Battery
 - c. **Libel** *Refer to slide 16*
 - d. Malpractice
2. “A threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening manner.” What is this the definition of?
 - a. **Assault** *Refer to slide 10*
 - b. Battery
 - c. Abuse
 - d. Negligence
3. Which of the following does **not** need to be proven to be charged with slander?
 - a. The statement was false
 - b. **The person speaking was underprivileged** *Refer to slide 16*
 - c. The person acted negligently when speaking
 - d. The statement was not privileged
4. As a healthcare professional, following legal responsibilities protects you, your employer, and _____.
 - a. The public
 - b. The patient’s family
 - c. Your colleagues
 - d. **The patient** *Refer to slide 6*
5. What type of “code of conduct” is based on morals and society’s expectations?
 - a. **Ethical** *Refer to slide 7*
 - b. Moral
 - c. Civil
 - d. Legal

Lesson One – Legal Responsibilities and Implications

LEARN: Legal Responsibilities and Implications Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to the legal and ethical responsibilities and implications for healthcare professionals.

Materials:

- *Legal Responsibilities and Implications* slide presentation
- *Legal Responsibilities and Implications Presentation Guide*
- *Legal Responsibilities and Implications Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Legal Responsibilities and Implications Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 1: Legal Responsibilities and Implications

Slide 2: The goals and objectives of this lesson are:

- Differentiate between criminal and civil law
- Describe healthcare professional's legal and ethical responsibilities
- Define "scope of practice"
- Define the healthcare professional's legal responsibilities and the implications of criminal and civil law as it applies to these eight violations:
 1. Abuse
 2. Assault
 3. Battery
 4. Invasion of Privacy
 5. Libel
 6. Malpractice
 7. Negligence
 8. Slander

Slide 3: Most charges against healthcare workers will **not** be charged as a criminal case. It is rare to be criminally charged unless there is a severe injury or a patient death. **Criminal law** seeks to punish the offender (defendant) with incarceration, financial compensation, probation, or community service. **Civil law** seeks compensation from the offender without further punishment.

Slide 4: Here are the differences in the filings and rulings of civil vs. criminal cases:

Civil Case

- Filed by a private party
- Found "liable" or "not liable"
- Either party can appeal the decision

Criminal Case

- Filed by the state
- Found "guilty" or "not guilty"
- Only the defendant can appeal the decision

Malpractice or liability insurance will help cover the costs associated with attorney's fees and compensation if the healthcare professional is found liable or guilty.

Slide 5: Following the legal responsibilities protect you, your employer, and the patient.

- The legal responsibilities are based on law and must be followed.
- The laws are enforced by local, state, and federal governments.
- Healthcare professionals must know and follow the laws that regulate their license or registration.
- Following these standards for the healthcare professional will help prevent lawsuits.

Slide 6: Every agency may have a different code of conduct regarding ethical responsibilities. However, most agencies incorporate these into their codes.

- Respect the social, ethnic, and cultural differences of patients and other healthcare professionals.
- Do not perform skills outside your scope of practice.
- Ethical codes of conduct are based on morals and society's expectations.

Slide 7: Scope of practice describes “the procedures, actions, and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license. The scope of practice is limited to the law allowing for specific education and experience and specific demonstrated competency. Each jurisdiction has laws, licensing bodies, and regulations that describe requirements for education and training, and define scope of practice.” When healthcare professionals act within their scope of practice and have carefully documented their interactions with patients, they are better protected if civil or criminal charges are brought against them.

Slide 8: Abuse is “any action or failure to act which causes unreasonable suffering, misery, or harm to the patient.”

Examples of abuse:

- Physical abuse
- Sexual assault
- Withholding food, medical attention, and physical care
- Verbal abuse
- Child abuse
- Domestic abuse
- Elder abuse

Abuse is a **mandated reporting requirement** for healthcare professionals in all parts of the United States. If a healthcare professional suspects abuse to a patient of any kind, whether another healthcare practitioner causes the abuse or another person is suspected, the healthcare professional must report it. If the healthcare professional does not report the abuse, they could be held liable. If a charge of abuse is brought against a healthcare professional, an immediate investigation will be performed.

Slide 9: The definition of assault is “a threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening

manner.” Often, assault and abuse are used interchangeably; however, physical injury is not required to be charged with assault.

Slide 10: The legal definition of battery is “any unlawful and/or unwanted touching of the person of another by the aggressor, or by a substance put in motion by him.” While **abuse** does not necessarily have physical contact, **battery** is force or violence upon another person. Many times, if a person is charged with battery, they are also charged with assault.

Slide 11: Invasion of privacy refers to a person failing to respect another person's right to keep certain personal information from being known. Some examples of invasion of privacy are sharing a patient's medical information to family members without their permission or sharing a patient's information on social media.

Slide 12: Libel is a legal term that refers to “the making of false and malicious statements about a person in some type of print or writing. This can include false and/or malicious statements made in writing, printed on signs, or published on a public forum. Publishing defamatory statements or pictures through the media is also considered libel.” For information to be deemed inflammatory, it must be false. Also, to be charged with libel, the defamatory information must meet one or more of these conditions:

- The information damages the patient's reputation
- It leads the patient to be subject to ridicule, contempt, or hatred
- It causes the patient to be avoided or shunned

Slide 13: Malpractice is a “failure to act correctly or legally when doing your job, often causing injury or loss.” Medical malpractice can occur when a doctor, hospital, or another healthcare professional, through a negligent act or omission, causes injury or death to a patient. The negligence might be the result of errors in diagnosis, treatment, aftercare, or health management.

It is not impossible for a healthcare professional to be criminally charged or convicted of malpractice, but it is rare. Extreme circumstances are required for wrongful death or

medical malpractice to be charged criminally, most often after a patient's death. Most malpractice cases are civil cases where a healthcare professional acted incorrectly or was negligent in their duties.

Slide 14: “Failure to perform duties or activities with due diligence and attention or to meet the standards of regular care.” For a healthcare professional to be found negligent in their duties requires the following circumstances to be proven:

- The healthcare professional had a duty to the patient
- The healthcare professional committed a breach of duty and did not provide the standard of care expected of them
- The healthcare professional caused physical or emotional harm to the patient by not providing the standard of care

Slide 15: Slander is “an untrue, defamatory statement made about someone that is spoken orally.”

Libel and slander are similar; however, libel consists of untrue, defamatory statements made in writing. Libel is considered more harmful than slander. To be charged with slander, the following must be proven:

- The statement made was false
- The statement does not fall in any privileged category (privileged statements cannot be made the basis for a slander claim)
- The person who said the defamatory statement acted negligently
- The person the defamatory statement was made about was harmed

Slide 16: Every state has different laws regarding the civil and criminal implications and repercussions for the mentioned eight violations. While most of the implications will produce civil charges, criminal charges can be brought against a healthcare professional when there is a wrongful death or medical malpractice. The prosecuting attorney must prove beyond a reasonable doubt that the healthcare professional

was criminally negligent in their duties, which is rare. Every agency has different standards of care, so it is essential to follow local protocols for patient care and documentation. Many agencies require their healthcare employees to provide professional liability or malpractice insurance in the event that criminal or civil charges are brought against them.

When there is a charge brought against a healthcare professional, an immediate investigation is performed by the employer or law enforcement, at which time the accused is placed on administrative leave. If the investigation produces evidence that there was a crime, court proceedings will take place. If the healthcare professional is found liable or guilty, their license can be suspended or revoked, in addition to compensation, incarceration, probation, or community service. Follow mandating reporting requirements for your state and agency if you observe another healthcare professional violating any patient's rights.

2. Review the answers on the Presentation Guide if desired.
3. Have participants partner up. Discuss and write down 20 topics that you believe should be covered in a healthcare professional code of ethics.
4. Call the class back together and have each pair of participants share two of the topics they have on their list. Create a master list on a whiteboard. Have participants share more topics until you have a master list of everything on the lists.

Name: _____ Class: _____

Legal Responsibilities and Implications Presentation Guide

Complete the following information as you listen to the Legal Responsibilities and Implications slide presentation.

Criminal vs. Civil Law

Most charges against healthcare workers **will / will not** (circle one) be charged as a criminal case. It is rare to be charged criminally unless there is a severe injury or a patient's death due to negligence.

Criminal Law: seeks to punish the offender _____ with incarceration, financial compensation, probation, or community service.

Civil Law: seeks compensation from the _____ without further punishment.

Filings and Rulings

Civil Case

- Filed by a _____
- Found "liable" or "not liable"
- _____ can appeal the decision

Criminal Case

- Filed by the _____
- Found "guilty" or "not guilty"
- Only the _____ can appeal the decision

Legal Responsibilities

- Following the legal responsibilities protect you, your employer, and the patient.
- The legal responsibilities are based on _____ and must be followed.
- The laws are enforced by local, state, and federal governments.
- Healthcare professionals must _____ and _____ the laws that regulate their license or registration.
- Following these standards for the healthcare professional will help prevent _____.

Ethical Responsibilities

- Respect the social, ethnic, and cultural differences of patients and other healthcare professionals.
- _____ perform skills outside your scope of practice.
- Ethical codes of conduct are based on _____ and society's expectations.

Scope of practice describes “the procedures, actions, and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license. The scope of practice is limited to that which the law allows for specific education and experience, and specific demonstrated competency. Each jurisdiction has _____, _____ and _____ that describe requirements for education and training, and define scope of practice.”

Abuse is _____

Examples of abuse:

1. Physical abuse
2. _____
3. Withholding food, medical attention, and physical care
4. _____

Abuse is a _____ reporting requirement for all healthcare professionals.

Assault

The definition of assault is _____

Physical injury is not required to be charged with assault.

Battery

The legal definition of battery is _____

While **abuse** does not necessarily have physical contact, **battery** is force or violence upon another person.

Invasion of Privacy

Invasion of privacy refers to a person _____

Libel

Libel is a legal term that refers to “the making of false and malicious statements about a person in some type of print or writing. This can include _____ and _____ statements made in writing, printed on signs, or published on a public forum. Publishing defamatory statements or pictures through the media is also considered libel.”

To be charged with libel, one or more of these conditions must be met:

- The patient’s reputation _____
- The patient becomes _____
- The patient is _____

Malpractice

Malpractice is a _____

Medical malpractice can occur when a doctor, hospital or another healthcare professional, through a negligent _____ or _____, causes injury or death to a patient. The negligence might be the result of errors in diagnosis, treatment, aftercare, or health management.

Negligence

“Failure to perform duties or activities with due diligence and attention or to meet the standards of regular care.”

For a healthcare professional to be found negligent in their duties requires the following circumstances to be proven:

- The healthcare professional _____
- The healthcare professional committed a breach of duty and _____

- The healthcare professional caused physical or emotional harm to the patient by not providing the _____.

Slander

Slander is _____

Libel and slander are similar; however, libel is untrue, defamatory statements made in writing. Libel is considered **more / less** (circle one) harmful than slander.

The following must be proven to be charged with slander:

- The statement was _____
- The statement was not privileged
- The person acted negligently when _____
- The person the false statement was made about was harmed

Civil and Criminal Implications

- Each _____ has different laws
- Most implications related to healthcare are civil cases
- Criminal charges for death or severe injury to a patient (criminal negligence or malpractice)
- Follow your scope of practice to _____ your liability
- Every agency has _____ standards
- An immediate investigation is performed
- License suspended or revoked if found _____
- Mandatory reporting requirements

Legal Responsibilities and Implications

Presentation Guide – Answer Key

Criminal vs. Civil Law

Most charges against healthcare workers will / will not (circle one) be charged as a criminal case. It is rare to be charged criminally, unless there is a severe injury, or a patient's death due to negligence.

Criminal Law—seeks to punish the offender defendant with incarceration, financial compensation, probation, or community service.

Civil Law—seeks compensation from the offender without further punishment.

Filings and Rulings

Civil Case

- Filed by a private party
- Found “liable” or “not liable”
- Either party can appeal the decision

Criminal Case

- Filed by the state
- Found “guilty” or “not guilty”
- Only the defendant can appeal the decision

Legal Responsibilities

- Following the legal responsibilities protect you, your employer, and the patient.
- The legal responsibilities are based on law and must be followed.
- The laws are enforced by local, state, and federal governments.
- Healthcare professionals must know and follow the laws that regulate their license or registration.
- Following these standards for the healthcare professional will help prevent lawsuits.

Ethical Responsibilities

- Respect the social, ethnic, and cultural differences of patients and other healthcare professionals.
- Do not perform skills outside your scope of practice.
- Ethical codes of conduct are based on morals and society's expectations.

Scope of practice describes “the procedures, actions, and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license.

The scope of practice is limited to that which the law allows for specific education and experience, and specific demonstrated competency. Each jurisdiction has laws, licensing bodies and regulations that describe requirements for education and training, and define scope of practice.”

Abuse is any action or failure to act which causes unreasonable suffering, misery, or harm to the patient.

Examples of abuse:

1. Physical abuse
2. **Sexual assault**
3. Withholding food, medical attention, and physical care
4. **Verbal abuse**

Abuse is a **mandatory** reporting requirement for all healthcare professionals.

Assault

The definition of assault is **a threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening manner.**

Physical injury is not required to be charged with assault.

Battery

The legal definition of battery is **any unlawful and or unwanted touching of the person of another by the aggressor, or by a substance put in motion by him.**

While **abuse** does not necessarily have physical contact, **battery** is force or violence upon another person.

Invasion of Privacy

Invasion of privacy refers to a person **failing to respect another person's right to keep certain personal information from being known.**

Libel

Libel is a legal term that refers to "the making of false and malicious statements about a person in some type of print or writing. This can include **false and malicious** statements made in writing, printed on signs, or published on a public forum. Publishing defamatory statements or pictures through the media is also considered libel."

To be charged with libel, one or more of these conditions must be met:

- The patient's reputation **is damaged**
- The patient becomes **ridiculed or hated**
- The patient is **avoided or shunned**

Malpractice

Malpractice is **a failure to act correctly or legally when doing your job, often causing injury or loss.**

Medical malpractice can occur when a doctor, hospital, or another healthcare professional, through a negligent **act or omission**, causes injury or death to a patient.

The negligence might be the result of errors in diagnosis, treatment, aftercare, or health management.

Negligence

“Failure to perform duties or activities with due diligence and attention or to meet the standards of regular care.”

For a healthcare professional to be found negligent in their duties requires the following circumstances to be proven:

- The healthcare professional **had a duty to the patient**
- The healthcare professional committed a breach of duty and **did not provide the standard of care expected of them.**
- The healthcare professional caused physical or emotional harm to the patient by not providing the **standard of care.**

Slander

Slander is **an untrue, defamatory statement made about someone that is spoken orally.**

Libel and slander are similar; however, libel is untrue, defamatory statements made in writing. Libel is considered **more** / less (circle one) harmful than slander.

The following must be proven to be charged with slander:

- The statement was **false**
- The statement was not privileged
- The person acted negligently when **speaking**
- The person the false statement was made about was harmed

Civil and Criminal Implications

- Each **state** has different laws
- Most implications related to healthcare are civil cases
- Criminal charges for death or severe injury to a patient (criminal negligence or malpractice)
- Follow your scope of practice to **decrease** your liability
- Every agency has **different** standards
- An immediate investigation is performed
- License suspended or revoked if found **liable or guilty**
- Mandatory reporting requirements

Lesson One – Legal Responsibilities and Implications

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on legal responsibilities and implications for healthcare professionals. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Legal Responsibilities and Implications Post-Test*
- *Legal Responsibilities and Implications Post-Test – Answer Key*

Facilitation Steps:

1. Have participants complete the following workbook pages: *Mandatory Reporting* and *Sample Reporting Form*.
2. Hand out the post-test and give participants a few minutes to complete it.
3. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small-Group Challenge:

1. Have participants work in five small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.

3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Legal Responsibilities and Implications Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is considered the most harmful form of defamation?
 - a. Slander
 - b. Battery
 - c. Libel
 - d. Malpractice
2. "A threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening manner." What is this the definition of?
 - a. Assault
 - b. Battery
 - c. Abuse
 - d. Negligence
3. Which of the following does **not** need to be proven to be charged with slander?
 - a. The statement was false
 - b. The person speaking was underprivileged
 - c. The person acted negligently when speaking
 - d. The statement was not privileged
4. As a healthcare professional, following legal responsibilities protects you, your employer, and _____.
 - a. The public
 - b. The patient's family
 - c. Your colleagues
 - d. The patient
5. What type of "code of conduct" is based on morals and society's expectations?
 - a. Ethical
 - b. Moral
 - c. Civil
 - d. Legal

Legal Responsibilities and Implications Post-Test – Answer Key

1. Which of these is considered the most harmful form of defamation?
 - a. Slander
 - b. Battery
 - c. **Libel** *Refer to slide 16*
 - d. Malpractice
2. “A threat or attempt to inflict physical contact or bodily harm on a person, such as lifting a fist in a threatening manner.” What is this the definition of?
 - a. **Assault** *Refer to slide 10*
 - b. Battery
 - c. Abuse
 - d. Negligence
3. Which of the following does **not** need to be proven to be charged with slander?
 - a. The statement was false
 - b. **The person speaking was underprivileged** *Refer to slide 16*
 - c. The person acted negligently when speaking
 - d. The statement was not privileged
4. As a healthcare professional, following legal responsibilities protects you, your employer, and _____.
 - a. The public
 - b. The patient’s family
 - c. Your colleagues
 - d. **The patient** *Refer to slide 6*
5. What type of “code of conduct” is based on morals and society’s expectations?
 - a. **Ethical** *Refer to slide 7*
 - b. Moral
 - c. Civil
 - d. Legal

Sources

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4. Lockhart, Lisa. (2017, March/April). *Nurses Under Investigation*. Retrieved from https://www.nursingcenter.com/journalarticle?Article_ID=3981709&Journal_ID=417221&Issue_ID=3981512
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Lesson Two – Patient Basic Rights and Responsibilities

Lesson Overview

In this lesson, participants will learn about patients' basic rights and responsibilities in a healthcare setting.

Lesson Objectives

After completing this lesson, participants will be able to:

- Summarize patients' basic rights within a healthcare setting
- Explain how a patient reports a violation of their rights
- Describe patient responsibilities as it applies to healthcare

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Patient Basic Rights and Responsibilities (Focus on Empathy)</i> worksheet • <i>Patient Basic Rights and Responsibilities (Focus on Empathy)</i> Instructor Resource • <i>Patient Basic Rights and Responsibilities Pre-Test</i> • <i>Patient Basic Rights and Responsibilities Pre-Test – Answer Key</i>	1. Print/photocopy <i>Patient Basic Rights and Responsibilities (Focus on Empathy)</i> worksheet (one per participant) 2. Print/photocopy <i>Patient Basic Rights and Responsibilities Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Patient Basic Rights and Responsibilities</i> slide presentation • <i>Patient Basic Rights and Responsibilities Presentation Guide</i> • <i>Patient Basic Rights and Responsibilities Presentation Guide – Answer Key</i>	1. Prepare <i>Patient Basic Rights and Responsibilities</i> slide presentation for viewing 2. Print/photocopy the <i>Patient Basic Rights and Responsibilities Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• Ethical and Legal Issues in Healthcare Student Workbook • <i>Patient Basic Rights and Responsibilities Post-Test</i> • <i>Patient Basic Rights and Responsibilities Post-Test – Answer Key</i>	1. Print/photocopy <i>Patient Basic Rights and Responsibilities Post-Test</i> (one per participant)	20 minutes

Lesson Two – Patient Basic Rights and Responsibilities

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Patient Basic Rights and Responsibilities (Focus on Empathy) worksheet*
- *Patient Basic Rights and Responsibilities (Focus on Empathy) Instructor Resource*
- *Patient Basic Rights and Responsibilities Pre-Test*
- *Patient Basic Rights and Responsibilities Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Patient Basic Rights and Responsibilities (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Patient Basic Rights and Responsibilities (Focus on Empathy) Instructor Resource* page available.
3. Distribute the *Patient Basic Rights and Responsibilities Pre-Test*.
4. Have the *Patient Basic Rights and Responsibilities Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Patient Basic Rights and Responsibilities (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Dana is a caregiver who takes care of Thomas, a widowed 84-year-old male who has mobility issues and needs assistance with daily care. For the past month, Thomas complained of difficulty urinating and finally agreed to see his physician, Doctor Miller. Doctor Miller's assistant called and said the lab results came back, and the physician needs to speak with Thomas today. Dana accompanies Thomas to his meeting, where Doctor Miller tells Thomas he has been diagnosed with advanced-stage prostate cancer and needs to start chemotherapy immediately. Thomas tells Doctor Miller that he would like to take a day or two to discuss this with Dana and decide if he wants to undergo treatment. Doctor Miller tells him that he has scheduled Thomas for chemotherapy today and that it is in his best interest to follow his treatment plan.

REFLECT on the situation:

What emotions do you think Thomas is feeling after hearing this news?

I would think Thomas feels shocked and in disbelief upon hearing the news that he has cancer. I also think Thomas would be surprised that Doctor Miller has chemotherapy scheduled so quickly.

What emotions do you think Dana is feeling?

I think Dana would also feel shocked at the news and sad for Thomas. As a caregiver, I believe Dana would want Thomas to seek a second opinion before agreeing to Doctor Miller's treatment program.

Do you think Doctor Miller is violating Thomas's patient rights?

I believe Doctor Miller could be violating Thomas's rights if he does not offer Thomas to seek a second opinion and have a say in his treatment program. Thomas has the right to refuse treatment if he chooses, and to see another physician for a diagnosis.

According to Thomas's patient rights, what could he do in this situation regarding his diagnosis and treatment plan?

Thomas could make an appointment with another physician, refuse treatment, or follow his doctor's treatment plan.

SHARE your thoughts with a peer when it's discussion time.

Patient Basic Rights and Responsibilities (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Dana is a caregiver who takes care of Thomas, a widowed 84-year-old male who has mobility issues and needs assistance with daily care. For the past month, Thomas complained of difficulty urinating and finally agreed to see his physician, Doctor Miller. Doctor Miller's assistant called and said the lab results came back, and the physician needs to speak with Thomas today. Dana accompanies Thomas to his meeting, where Doctor Miller tells Thomas he has been diagnosed with advanced-stage prostate cancer and needs to start chemotherapy immediately. Thomas tells Doctor Miller that he would like to take a day or two to discuss this with Dana and decide if he wants to undergo treatment. Doctor Miller tells him that he has scheduled Thomas for chemotherapy today and that it is in his best interest to follow his treatment plan.

REFLECT on the situation:

What emotions do you think Thomas is feeling after hearing this news?

What emotions do you think Dana is feeling?

Do you think Doctor Miller is violating Thomas's patient rights?

According to Thomas's patient rights, what could he do in this situation regarding his diagnosis and treatment plan?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Patient Basic Rights and Responsibilities

Pre-Test

Select the best answer to the following multiple-choice questions:

1. The _____ describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's advocates and respecting their rights.
 - a. American Medical Association
 - b. American Hospital Association
 - c. American Healthcare Association
 - d. American Insurance Association
2. When discussing treatment options with a patient, which of the following may be suggested by the healthcare professional that **isn't** mentioned in the lesson?
 - a. Advise patients on the cost
 - b. Advise patients on the risks
 - c. Advise patients on the benefits
 - d. Advise patients to discuss with their family
3. What is a patient's right regarding medical records?
 - a. The patient does not have the right to see their medical records
 - b. The patient has a right to a copy of their medical records
 - c. The patient has a right to the original medical records
 - d. The patient must pay for the actual medical record
4. If a patient feels their rights have been violated, they can contact a patient advocate or their state's _____.
 - a. Department of Criminal Complaints
 - b. Superior Court
 - c. Department of Health
 - d. Better Business Bureau
5. Which of these is **not** mentioned regarding a patient being financially responsible?
 - a. Hiring an accountant
 - b. Making an effort to pay their bills
 - c. Knowledge of their health plan coverage
 - d. Following their health plan's administrative procedures

Patient Basic Rights and Responsibilities Pre-Test – Answer Key

1. The _____ describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's advocates and respecting their rights.
a. American Medical Association *Refer to slide 5*
b. American Hospital Association
c. American Healthcare Association
d. American Insurance Association
2. When discussing treatment options with a patient, which of the following may be suggested by the healthcare professional but **isn't** mentioned in the lesson?
a. Advise patients on the cost
b. Advise patients on the risks
c. Advise patients on the benefits
d. Advise patients to discuss with their family *Refer to slide 7*
3. What is a patient's right regarding medical records?
a. The patient does not have the right to see their medical records
b. The patient has a right to a copy of their medical records *Refer to slide 11*
c. The patient has a right to the original medical records
d. The patient must pay for the actual medical record
4. If a patient feels their rights have been violated, they can contact a patient advocate or their state's _____.
a. Department of Criminal Complaints
b. Superior Court
c. Department of Health *Refer to slide 15*
d. Better Business Bureau
5. Which of these is **not** mentioned regarding a patient being financially responsible?
a. Hiring an accountant *Refer to slide 19*
b. Making an effort to pay their bills
c. Knowledge of their health plan coverage
d. Following their health plan's administrative procedure

Lesson Two – Patient Basic Rights and Responsibilities

LEARN: Patient Basic Rights and Responsibilities Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to patient basic rights and responsibilities in a healthcare setting.

Materials:

- *Patient Basic Rights and Responsibilities* slide presentation
- *Patient Basic Rights and Responsibilities Presentation Guide*
- *Patient Basic Rights and Responsibilities Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Patient Basic Rights and Responsibilities Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 2: Patient Basic Rights and Responsibilities

Slide 2: The goals and objectives of this lesson are:

- Summarize patient basic rights within a healthcare setting
- Explain how a patient reports a violation of their rights
- Describe patient responsibilities as they apply to healthcare

Slide 3: The legal definition is “patient rights is a general statement adopted by most healthcare professionals, covering such matters as access to care, patient dignity, confidentiality, and consent to treatment.” Patients have rights that stem from the ethical practice of medicine and basic human rights.

Slide 4: The American Medical Association (AMA) describes a mutually respectful alliance

between healthcare professionals and their patients by serving as their patient’s advocates and respecting their rights.

The following slides outline the nine basic patient rights:

1. Respond to the patient’s needs
2. Receive information and discuss treatment programs
3. Ask questions
4. Make decisions
5. Privacy
6. Medical records
7. Second opinion
8. Conflicts of interest
9. Continuity of care

Many agencies will adopt a unique version of the patient basic rights to fit their needs. It is the healthcare professional’s duty to know the patient rights for the agency where they are employed.

Slide 5: Have respect, courtesy, and timely attention to the patient’s needs. If you cannot respond timely to the patient’s needs, enlist help from another healthcare professional.

Slide 6: The healthcare professional will provide the patient with information and discuss treatment programs. During the discussion, healthcare professionals will advise the patient on the costs, risks, and benefits of said treatment.

Slide 7: The patient has the right to ask questions about their health and recommended treatment programs. Allow time to have all the patient’s questions answered.

Slide 8: The patient has the right to make decisions about the care the healthcare professional recommends and have their decision respected. Patients have the right to refuse treatment if they desire.

Slide 9: All healthcare professionals must respect the patient's privacy and confidentiality of sensitive information. Healthcare professionals must safeguard the patient's medical records and respect their privacy in written and oral communication.

Slide 10: The patient has the right to obtain copies of their medical records. The original records will stay with the healthcare professional, but the patient can receive a copy of their records upon request.

Slide 11: If the patient wants a second opinion, they have the right to get one. Healthcare professionals should present their patients with alternative treatment options, but the patient has the right to a second opinion regarding their diagnosis and treatment plans.

Slide 12: The patient must be advised if there is a conflict of interest between the healthcare professional and themselves. An example is if a healthcare professional would make money from a secondary source, such as a pharmaceutical company, for treating a patient.

Slide 13: The patient has the right to receive continuous care that is coordinated with other healthcare professionals. If treatment or care needs to be discontinued by the healthcare professional, the patient needs sufficient time and assistance in finding alternative arrangements for care.

Slide 14: If a patient feels their rights have been violated, they can speak with a patient advocate or call their state's Department of Health. Following your scope of practice and code of conduct will help ensure a patient's rights are not violated.

Slide 15: In addition to patients having rights, they also have responsibilities, which are:

- Be responsible for their health
- Provide accurate information about their health
- Be financially responsible
- Be respectful to others

Slide 16: Patients must be responsible for their health, including:

- Exercise, a healthy diet, and good habits
- Prevent the spread of their disease
- Make healthcare decisions and follow treatment programs
- Understand the limitations of medical science and realize that healthcare professionals can make mistakes.

Slide 17: Patients are responsible for providing accurate information about their health and letting healthcare professionals know what they want and need.

Slide 18: It is the patient's responsibility to be financially and administratively responsible. They must:

- Make a good-faith effort to pay their bills
- Be knowledgeable about their health plan coverage
- Follow their health plan's administrative procedures

Slide 19: The patient shall show respect for healthcare professionals and other patients. The patient should be aware of the responsibility that healthcare professionals have to other patients. The patient is responsible for understanding that healthcare professionals need to divide their time efficiently and equitably between multiple patients.

2. Review the answers on the Presentation Guide if desired.
3. Give participants the following exercise to complete. Investigate why a healthcare professional may not be able to continue care with a patient. Write a brief synopsis of how the healthcare professional can avoid violating the patient's right to continued care.

Name: _____ Class: _____

Patient Basic Rights and Responsibilities Presentation Guide

Complete the following information as you listen to the Lesson 2 presentation.

What Are Patient Basic Rights?

The legal definition is _____

These rights stem from the ethical practice of medicine and basic human rights.

Patient Basic Rights

The American Medical Association (AMA) describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's _____ and respecting their rights.

Nine basic patient rights:

#	Patient Right	Description
1		
2		
3		
4		

5		
6		
7		
8		
9		

If treatment or care needs to be discontinued by the healthcare professional, the patient needs sufficient _____ in finding alternative arrangements for care.

Violation of Patient Rights

If a patient feels their rights have been _____, they can speak with a patient advocate or call their state's Department of Health.

Following your scope of practice and code of conduct will help ensure that a patient's rights are _____ violated.

Patient Responsibilities

In addition to patient's having rights, they also have responsibilities, which are:

Be _____

Provide accurate information _____

Be _____

Be _____

Be Responsible for Their Health

Provide health information

Patients are _____ for providing accurate information about their health and letting healthcare professionals know what they want and need.

Be Financially Responsible

It is the patient's responsibility to be financially and administratively responsible, such as:

- Make _____ to pay their bills
- Be knowledgeable about their health plan coverage
- Follow their health plans' _____

Be Respectful to Others

The patient shall show _____ for healthcare professionals and other patients.

The patient should be _____ of the responsibility healthcare professionals have to other patients.

Patient Basic Rights and Responsibilities

Presentation – Answer Key

What Are Patient Basic Rights?

The legal definition is **patient rights is a general statement adopted by most healthcare professionals, covering such matters as access to care, patient dignity, confidentiality, and consent to treatment.**

These rights stem from the ethical practice of medicine and basic human rights.

Patient Basic Rights

The American Medical Association (AMA) describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's **advocates** and respecting their rights.

Nine basic patient rights:

#	Patient Right	Description
1	Respond to the Patient's Needs	Give respect, courtesy, and timely attention to the patient's needs.
2	Discuss Treatment	The healthcare professional will provide the patient with information and discuss treatment programs. During the discussion, healthcare professionals will advise the patient on the costs, risks, and benefits of said treatment.
3	Ask Questions	The patient has the right to ask questions about their health and recommended treatment programs.
4	Make Decisions	The patient has the right to make decisions about the care the healthcare professional recommends and have their decision respected.
5	Privacy	All healthcare professionals must respect the patient's privacy and confidentiality of sensitive information.
6	Medical Records	The patient has the right to obtain copies of their medical records.
7	Second Opinion	If the patient wants a second opinion, they have the right to do so.
8	Conflict of Interest	The patient must be advised if there is a conflict of interest between the healthcare professional and themselves.
9	Continuity of Care	The patient has the right to receive continuous care that is coordinated with other healthcare professionals.

If treatment or care needs to be discontinued by the healthcare professional, the patient needs sufficient **time and assistance** in finding alternative arrangements for care.

Violation of Patient Rights

If a patient feels their rights have been **violated**, they can speak with a patient advocate or call their state's Department of Health.

Following your scope of practice and code of conduct will help ensure that a patient's rights are **not** violated.

Patient Responsibilities

In addition to patient's having rights, they also have responsibilities, which are:

Be **responsible for their health**

Provide accurate information **about their health**

Be **financially responsible**

Be **respectful to others**

Be Responsible for Their Health

Provide health information

Patients are **responsible** for providing accurate information about their health and letting healthcare professionals know what they want and need.

Be Financially Responsible

It is the patient's responsibility to be financially and administratively responsible, such as:

- Make **a good faith effort** to pay their bills
- Be knowledgeable about their health plan coverage
- Follow their health plans' **administrative procedures**

Be Respectful to Others

The patient shall show **respect** for healthcare professionals and other patients.

The patient should be **aware** of the responsibility healthcare professionals have to other patients.

Lesson Two – Patient Basic Rights and Responsibilities

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on patient basic rights and responsibilities in a healthcare setting. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Patient Basic Rights and Responsibilities Post-Test*
- *Patient Basic Rights and Responsibilities Post-Test – Answer Key*

Facilitation Steps:

1. Have participants complete the workbook pages: *Patient Rights* and *Conflict of Interest*.
2. Instruct participants to take a few minutes to complete the post-test.
3. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.

2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Patient Basic Rights and Responsibilities Post-Test

Select the best answer to the following multiple-choice questions:

1. The _____ describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's advocates and respecting their rights.
 - a. American Medical Association
 - b. American Hospital Association
 - c. American Healthcare Association
 - d. American Insurance Association
2. When discussing treatment options with a patient, which of the following may be suggested by the healthcare professional but **isn't** mentioned in the lesson?
 - a. Advise patients on the cost
 - b. Advise patients on the risks
 - c. Advise patients on the benefits
 - d. Advise patients to discuss with their family
3. What is a patient's right regarding medical records?
 - a. The patient does not have the right to see their medical records
 - b. The patient has a right to a copy of their medical records
 - c. The patient has a right to the original medical records
 - d. The patient must pay for the actual medical record
4. If a patient feels their rights have been violated, they can contact a patient advocate or their state's _____.
 - a. Department of Criminal Complaints
 - b. Superior Court
 - c. Department of Health
 - d. Better Business Bureau
5. Which of these is **not** mentioned regarding a patient being financially responsible?
 - a. Hiring an accountant
 - b. Making an effort to pay their bills
 - c. Knowledge of their health plan coverage
 - d. Following their health plan's administrative procedures

Patient Basic Rights and Responsibilities Post-Test – Answer Key

1. The _____ describes a mutually respectful alliance between healthcare professionals and their patients by serving as their patient's advocates and respecting their rights.
a. American Medical Association *Refer to slide 5*
 - b. American Hospital Association
 - c. American Healthcare Association
 - d. American Insurance Association
2. When discussing treatment options with a patient, which of the following may be suggested by the healthcare professional but **isn't** mentioned in the lesson?
 - a. Advise patients on the cost
 - b. Advise patients on the risks
 - c. Advise patients on the benefits
 - d. Advise patients to discuss with their family** *Refer to slide 7*
3. What is a patient's right regarding medical records?
 - a. The patient does not have the right to see their medical records
 - b. The patient has a right to a copy of their medical records** *Refer to slide 11*
 - c. The patient has a right to the original medical records
 - d. The patient must pay for the actual medical record
4. If a patient feels their rights have been violated, they can contact a patient advocate or their state's _____.
 - a. Department of Criminal Complaints
 - b. Superior Court
 - c. Department of Health** *Refer to slide 15*
 - d. Better Business Bureau
5. Which of these is **not** mentioned regarding a patient being financially responsible?
 - a. Hiring an accountant** *Refer to slide 19*
 - b. Making an effort to pay their bills
 - c. Knowledge of their health plan coverage
 - d. Following their health plan's administrative procedure

Sources

1. American Medical Association Website (2021). *Patient Rights*. Retrieved from <https://www.ama-assn.org/delivering-care/ethics/patient-rights>
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Lesson Three – Informed and Implied Consent and Advance Directives

Lesson Overview

In this lesson, participants will learn to differentiate between informed and implied consent and advance directives in a healthcare setting.

Lesson Objectives

After completing this lesson, participants will be able to:

- Define informed consent
- Explain implied consent
- Differentiate informed vs. implied consent
- Define advance directive

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Informed and Implied Consent and Advance Directives (Focus on Empathy) worksheet</i> • <i>Informed and Implied Consent and Advance Directives (Focus on Empathy) Instructor Resource</i> • <i>Informed and Implied Consent and Advance Directives Pre-Test</i> • <i>Informed and Implied Consent and Advance Directives Pre-Test – Answer Key</i>	1. Print/photocopy <i>Informed and Implied Consent and Advance Directives (Focus on Empathy) worksheet</i> (one per participant) 2. Print/photocopy <i>Informed and Implied Consent and Advance Directives Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Informed and Implied Consent and Advance Directives slide presentation</i> • <i>Informed and Implied Consent and Advance Directives Presentation Guide</i> • <i>Informed and Implied Consent and Advance Directives Presentation Guide – Answer Key</i>	1. Prepare <i>Informed and Implied Consent and Advance Directives</i> slide presentation for viewing 2. Print/photocopy the <i>Informed and Implied Consent and Advance Directives Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• <i>Ethical and Legal Issues in Healthcare Student Workbook</i> • <i>Informed and Implied Consent and Advance Directives Post-Test</i> • <i>Informed and Implied Consent and Advance Directives Post-Test – Answer Key</i>	1. Print/photocopy <i>Informed and Implied Consent and Advance Directives Post-Test</i> (one per participant)	20 minutes

Lesson Three – Informed and Implied Consent and Advance Directives

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Informed and Implied Consent and Advance Directives (Focus on Empathy) worksheet*
- *Informed and Implied Consent and Advance Directives (Focus on Empathy) Instructor Resource*
- *Informed and Implied Consent and Advance Directives Pre-Test*
- *Informed and Implied Consent and Advance Directives Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Informed and Implied Consent and Advance Directives (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Informed and Implied Consent and Advance Directives (Focus on Empathy) Instructor Resource* page available.
3. Distribute the *Informed and Implied Consent and Advance Directives Pre-Test*.
4. Have the *Informed and Implied Consent and Advance Directives Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Informed and Implied Consent and Advance Directives (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Benjamin was asked by his 85-year-old mother, Mary, to take her to her chemotherapy appointment tomorrow afternoon. His mother had insisted on driving herself the past two weeks, but she has become weaker and more fragile and has reluctantly begun to ask for help. Mary had not even told her family she was sick until two days before when she called Benjamin for a ride. Mary has always been a strong, capable woman and is now being treated for stage 4 lung cancer.

After assisting Mary to his car, Benjamin realizes just how much weight his mother has lost and how she is unsteady on her feet. He hates to bring this up, but while driving to the appointment, Benjamin asks his mother if she has any paperwork in place. Mary acts surprised and says she doesn't understand what he is talking about. Benjamin asks if she has a living trust or medical power of attorney if she cannot make medical decisions independently. Mary snaps at him and says she is not going anywhere anytime soon and to mind his own business.

REFLECT on the situation:

What emotions do you think Benjamin is feeling after seeing his mother's deteriorating health?

I believe Benjamin would feel sad seeing his once strong mother becoming weak and frail. I think he would feel frustrated with his mother for not telling the family sooner that she was sick, and guilty for not realizing his mother's medical condition.

What emotions do you think Mary is feeling?

I think Mary is in denial about the seriousness of her medical condition. I feel that Mary would also feel scared and not want to talk about legal paperwork if she were to become mentally or physically incapable of making decisions.

Do you think Benjamin should consult with Mary's physician?

I do. I think Benjamin should speak with Mary's physician to see if they can help her decide on an advance directive.

Do you think Mary's physician should speak with Mary regarding advance directives?

I think all physicians should speak with their patients regarding advance directives so that the patient's healthcare decisions are met. I also believe that it might be easier for patients to take their doctor's advice before taking their family's advice.

SHARE your thoughts with a peer when it's discussion time.

Informed and Implied Consent and Advance Directives (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Benjamin was asked by his 85-year-old mother, Mary, to take her to her chemotherapy appointment tomorrow afternoon. His mother had insisted on driving herself the past two weeks, but she has become weaker and more fragile and has reluctantly begun to ask for help. Mary had not even told her family she was sick until two days before when she called Benjamin for a ride. Mary has always been a strong, capable woman and is now being treated for stage 4 lung cancer.

After assisting Mary to his car, Benjamin realizes just how much weight his mother has lost and how she is unsteady on her feet. He hates to bring this up, but while driving to the appointment, Benjamin asks his mother if she has any paperwork in place. Mary acts surprised and says she doesn't understand what he is talking about. Benjamin asks if she has a living trust or medical power of attorney if she cannot make medical decisions independently. Mary snaps at him and says she is not going anywhere anytime soon and to mind his own business.

REFLECT on the situation:

What emotions do you think Benjamin is feeling after seeing his mother's deteriorating health?

What emotions do you think Mary is feeling?

Do you think Benjamin should consult with Mary's physician?

Do you think Mary's physician should speak with Mary regarding advance directives?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Informed and Implied Consent and Advance Directives Pre-Test

Select the best answer to the following multiple-choice questions:

1. How many principles of informed consent are there for the consent to be valid?
 - a. Four
 - b. Six
 - c. Two
 - d. Five
2. When should the patient sign an informed consent agreement?
 - a. Before getting a cast
 - b. Before having lab work
 - c. Before getting x-rays
 - d. Before a surgical procedure
3. Which of these is **not** considered an advance directive?
 - a. A living will
 - b. An informed consent agreement
 - c. Do not resuscitate orders
 - d. A medical power of attorney
4. What would **not** be found on a living will?
 - a. Organ donation instructions
 - b. Instructions for inheritance disbursement
 - c. A do not resuscitate (DNR) order
 - d. Palliative care instructions
5. Which advance directive allows a competent patient to choose an agent to make decisions based on their healthcare if they cannot do so?
 - a. A living will
 - b. A do not resuscitate (DNR) order
 - c. A medical power of attorney
 - d. A last will and testament

Informed and Implied Consent and Advance Directives Pre-Test – Answer Key

1. How many principles of informed consent are there for the consent to be valid?
a. Four
b. Six
c. Two
d. Five
2. When should the patient sign an informed consent agreement?
a. Before getting a cast
b. Before having lab work
c. Before getting x-rays
d. Before a surgical procedure
3. Which of these is **not** considered an advance directive?
a. A living will
b. An informed consent agreement
c. Do not resuscitate orders
d. A medical power of attorney
4. What would **not** be found on a living will?
a. Organ donation instructions
b. Instructions for inheritance disbursement
c. A do not resuscitate (DNR) order
d. Palliative care instructions
5. Which advance directive allows a competent patient to choose an agent to make decisions based on their healthcare if they cannot do so?
a. A living will
b. A do not resuscitate (DNR) order
c. A medical power of attorney
d. A last will and testament

Lesson Three – Informed and Implied Consent and Advance Directives

LEARN: Informed and Implied Consent and Advance Directives Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to differentiating between informed and implied consent and advance directives in a healthcare setting.

Materials:

- *Informed and Implied Consent and Advance Directives* slide presentation
- *Informed and Implied Consent and Advance Directives Presentation Guide*
- *Informed and Implied Consent and Advance Directives Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Informed and Implied Consent and Advance Directives Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 3: Informed and Implied Consent and Advance Directives

Slide 2: The goals and objectives of this lesson are:

- Define informed consent
- Explain implied consent
- Differentiate informed vs. implied consent
- Define advance directive

Slide 3: Informed consent is an “agreement or permission to do something from someone who has been given full information about the possible effects or result.”

For example, a physician will give a patient information about a test or treatment, including the risks and benefits. The patient is informed,

and they have the right to make decisions about their health and treatment. If they agree to a test or procedure, they have been informed and give consent.

Slide 4: For informed consent to be valid, 4 principles must be met:

1. The patient has the ability to make the decision.
2. The healthcare professional must disclose information on the test, procedure, or treatment, including the risks and benefits.
3. The patient must be able to comprehend the information.
4. The patient must voluntarily give consent without duress or coercion.

Slide 5: When a patient agrees to a procedure, test, or treatment plan, an informed consent agreement should be signed and put in the patient’s medical record. An informed consent agreement should include the following information:

- Diagnosis of the patient’s condition
- The name and purpose of treatment
- Benefits, risks, and alternative treatment options
- The benefits and risks of each alternative option

With this information, the patient can make an educated choice about the procedures they receive. For routine procedures like blood work, x-rays, and casts, a signed agreement is not necessary. However, for more invasive procedures, like a surgical procedure, there is a greater risk to the patient, so an informed consent agreement should be signed.

Slide 6: The informed consent form is a legal document that will be kept with the patient’s medical records. This document will help protect

the healthcare professional in the event of a lawsuit. The reasons for signing the agreement are as follows:

- The healthcare professional provided the patient with information about the procedure or treatment
- The patient understands the information
- The patient used the information to make their decision
- The patient agrees or consents to receive the treatment or procedure

Slide 7: Implied consent is consent that is assumed, as in the case of an unconscious patient who cannot verbalize consent for treatment. In the United States, if a person is at risk of injury or death but is unconscious or unable to respond, implied consent is assumed to touch or treat the person.

The law states that rational patients would consent to treatment if they were conscious. Implied consent laws require that “intervention must be necessary, not merely convenient” and “that medical necessity requires a genuine perception of emergency, and a reasonable response.”

Slide 8: The main differentiation between informed and implied consent is the patient involvement in their healthcare decisions. With informed consent, the goal is to provide the patient with the necessary information for their healthcare, and they have a decision in their treatment plan. With implied consent, the patient is unconscious or unable to understand the severity of the emergency, so their healthcare decisions are made by healthcare professionals. Here are more examples of the differences between the two:

Informed Consent

- The patient is able to make decisions about their healthcare
- The patient is provided with treatment information, including benefits and risks
- The patient comprehends the information
- The patient voluntarily gives consent

Implied Consent

- The patient is unable to make healthcare decisions (unconscious or decreased mental capacity)

- The patient is treated as the healthcare professional deems necessary
- The patient is unable to comprehend the situation
- The patient cannot give verbal consent

Slide 9: An advance directive is “a legal document (such as a living will) signed by a competent person to provide guidance for medical and healthcare decisions (such as the termination of life support or organ donation) in the event the person becomes incompetent to make such decisions.”

Most advance directives are discussed between a competent patient and physician.

Slide 10: A living will is written for a competent patient to state their healthcare decisions when they become unable to make those decisions on their own. The living will is used at the end of a patient’s life if they become terminally ill or unconscious. The living will is the oldest type of advance directive used.

Slide 11: There can be any component to a living will based on the patient’s wishes. For a living will in the healthcare setting, these are common components of a living will:

- If you want the use of equipment to help keep you alive.
- Instructions **not** to use CPR if breathing or heartbeat stops (do not resuscitate orders)
- If you want fluids or food if you couldn't eat or drink
- If you want treatment for nausea, pain, or other symptoms (comfort or palliative care)
- If you want to donate your organs or other body parts after death

Slide 12: A medical power of attorney (POA) is also called a durable power of attorney for healthcare. A medical power of attorney is a legal document in which the competent patient names a person to be an agent, or proxy, to make all their healthcare decisions if they become unable to do so. Before a medical power of attorney can be used to guide medical decisions, a patient's physician must certify that they are unable to make their own healthcare decisions.

Slide 13: A do not resuscitate (DNR) order is a legal document signed by the patient and their

physician, stating that the patient does not wish to have resuscitative efforts if their heart stops beating, or they stop breathing. This document must be signed by a competent patient and their physician to be valid.

2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Informed and Implied Consent and Advance Directives Presentation Guide

Complete the following information as you listen to the Informed and Implied Consent and Advance Directives presentation.

What is Informed Consent?

Informed consent is an _____

The 4 Principles of Informed Consent

For informed consent to be valid, 4 principles must be met:

- The patient _____ to make the decision
- The healthcare professional must disclose information on the test, procedure, or treatment, including the risks and benefits
- The patient must be able to _____
- The patient must voluntarily give consent without duress or coercion

Informed Consent Agreement

An informed consent agreement should include the following information:

- Diagnosis of the _____
- The name and purpose of treatment
- Benefits, risks, and _____ treatment options
- The benefits and risks of each alternative option

Reasons for Signing the Agreement

1. The healthcare professional provided the patient with information about the procedure or treatment
2. The patient _____
3. The patient used the information to _____
4. The patient agrees, or consents, to receive the treatment or procedure

What is Implied Consent?

Implied consent is “_____” as in the case of an unconscious patient who cannot verbalize consent for treatment.

In the United States, if a person is at risk of injury or death but is unconscious or unable to respond, implied consent is _____ to touch or treat the person.

Informed vs. Implied Consent

Informed Consent

- The patient _____ make decisions about their healthcare
- The patient is provided with treatment information including benefits and risks
- The patient comprehends the information
- The patient _____ gives consent

Implied Consent

- The patient is _____ to make healthcare decisions (unconscious or decreased mental capacity)
- The patient is treated as the healthcare professional deems necessary
- The patient is unable to comprehend the situation
- The patient cannot give _____

Advance Directive

An advance directive is “a legal document (_____) signed by a _____ person to provide guidance for medical and healthcare decisions (such as the termination of life support or organ donation) in the event the person _____ to make such decisions.”

Most advance directives are discussed between the competent patient and physician.

Living Will

A living will is written for a _____ patient to state their healthcare decisions when they become unable to make those decisions on their own.

The living will is used _____ if they become terminally ill or unconscious.

Components of a Living Will

- If you want the use of equipment to help keep you _____
- Instructions to not start CPR if breathing or heartbeat stops (do not resuscitate (DNR) orders)
- If you want fluids or food if you couldn't eat or drink

Ethical and Legal Issues in Healthcare

- If you want treatment for nausea, pain, or other symptoms (comfort or palliative care)
- If you want to donate your _____ or other body parts after death

Medical Power of Attorney

A medical power of attorney (POA) is also called a _____.

A medical power of attorney is a _____ in which the competent patient names a person to be an agent, or proxy, to make all their healthcare decisions if they become unable to do so.

Do Not Resuscitate (DNR)

A do not resuscitate (DNR) order is a _____ signed by the patient and their physician, stating that the patient _____ to have resuscitative efforts if their heart stops beating or they stop breathing.

Informed and Implied Consent and Advance Directives Presentation Guide – Answer Key

What is Informed Consent?

Informed consent is an **agreement or permission to do something from someone who has been given full information about the possible effects or result.**

The 4 Principles of Informed Consent

For informed consent to be valid, 4 principles must be met:

- The patient **has the ability** to make the decision
- The healthcare professional must disclose information on the test, procedure, or treatment, including the risks and benefits
- The patient must be able to **comprehend the information**
- The patient must voluntarily give consent without duress or coercion

Informed Consent Agreement

An informed consent agreement should include the following information:

- Diagnosis of the **patient's condition**
- The name and purpose of treatment
- Benefits, risks, and **alternative** treatment options
- The benefits and risks of each alternative option

Reasons for Signing the Agreement

1. The healthcare professional provided the patient with information about the procedure or treatment
2. The patient **understands the information**
3. The patient used the information to **make their decision**
4. The patient agrees, or consents, to receive the treatment or procedure

What is Implied Consent?

Implied consent is "**consent that is assumed**" as in the case of an unconscious patient who cannot verbalize consent for treatment.

In the United States, if a person is at risk of injury or death but is unconscious or unable to respond, implied consent is **assumed** to touch or treat the person.

Informed vs. Implied Consent

Informed Consent

- The patient **is able to** make decisions about their healthcare
- The patient is provided with treatment information including benefits and risks
- The patient comprehends the information
- The patient **voluntarily** gives consent

Implied Consent

- The patient is **unable** to make healthcare decisions (unconscious or decreased mental capacity)

- The patient is treated as the healthcare professional deems necessary
- The patient is unable to comprehend the situation
- The patient cannot give **verbal consent**

Advance Directive

An advance directive is “a legal document (**such as a living will**) signed by a **competent** person to provide guidance for medical and healthcare decisions (such as the termination of life support or organ donation) in the event the person **becomes incompetent** to make such decisions.”

Most advance directives are discussed between the competent patient and physician.

Living Will

A living will is written for a **competent** patient to state their healthcare decisions when they become unable to make those decisions on their own.

The living will is used **at the end of a patient's life** if they become terminally ill or unconscious.

Components of a Living Will

- If you want the use of equipment to help keep you **alive**
- Instructions not to start CPR if breathing or heartbeat stops (do not resuscitate (DNR) orders)
- If you want fluids or food if you couldn't eat or drink
- If you want treatment for nausea, pain, or other symptoms (comfort or palliative care)
- If you want to donate your **organs** or other body parts after death

Medical Power of Attorney

A medical power of attorney (POA) is also called a **durable power of attorney for healthcare.**

A medical power of attorney is a **legal document** in which the competent patient names a person to be an agent, or proxy, to make all their healthcare decisions if they become unable to do so.

Do Not Resuscitate (DNR)

A do not resuscitate (DNR) order is a **legal document** signed by the patient and their physician, stating that the patient **does not wish** to have resuscitative efforts if their heart stops beating or they stop breathing.

Lesson Three – Informed and Implied Consent and Advance Directives

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on informed and implied consent and advance directives in a healthcare setting. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Informed and Implied Consent and Advance Directives Post-Test*
- *Informed and Implied Consent and Advance Directives Post-Test – Answer Key*

Facilitation Steps:

1. Have participants pair up. Each group should come up with five scenarios where implied consent would be necessary to treat an individual.
2. Call the pairs back together and share scenarios from each list.
3. Have participants complete the student workbook pages: *Living Will* and *Cost of Living Will and Medical POA*.
4. Instruct participants to take a few minutes to complete the post-test.
5. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Informed and Implied Consent and Advance Directives Post-Test

Select the best answer to the following multiple-choice questions:

1. How many principles of informed consent are there for the consent to be valid?
 - a. Four
 - b. Six
 - c. Two
 - d. Five
2. When should the patient sign an informed consent agreement?
 - a. Before getting a cast
 - b. Before having lab work
 - c. Before getting x-rays
 - d. Before a surgical procedure
3. Which of these is **not** considered an advance directive?
 - a. A living will
 - b. An informed consent agreement
 - c. Do not resuscitate orders
 - d. A medical power of attorney
4. What would **not** be found on a living will?
 - a. Organ donation instructions
 - b. Instructions for inheritance disbursement
 - c. A do not resuscitate (DNR) order
 - d. Palliative care instructions
5. Which advance directive allows a competent patient to choose an agent to make decisions based on their healthcare if they cannot do so?
 - a. A living will
 - b. A do not resuscitate (DNR) order
 - c. A medical power of attorney
 - d. A last will and testament

Informed and Implied Consent and Advance Directives Post-Test – Answer Key

1. How many principles of informed consent are there for the consent to be valid?
 - a. **Four**
 - b. Six
 - c. Two
 - d. Five
2. When should the patient sign an informed consent agreement?
 - a. Before getting a cast
 - b. Before having lab work
 - c. Before getting x-rays
 - d. **Before a surgical procedure**
3. Which of these is **not** considered an advance directive?
 - a. A living will
 - b. **An informed consent agreement**
 - c. Do not resuscitate orders
 - d. A medical power of attorney
4. What would **not** be found on a living will?
 - a. Organ donation instructions
 - b. **Instructions for inheritance disbursement**
 - c. A do not resuscitate (DNR) order
 - d. Palliative care instructions
5. Which advance directive allows a competent patient to choose an agent to make decisions based on their healthcare if they cannot do so?
 - a. A living will
 - b. A do not resuscitate (DNR) order
 - c. **A medical power of attorney**
 - d. A last will and testament

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Lesson Four – Safety, Privacy, and Confidentiality of Health Information

Lesson Overview

In this lesson, participants will learn about the HIPAA laws, patient privacy, and privileged communication in a healthcare setting. Participants will learn what is required of healthcare professionals to remain compliant with HIPAA.

Lesson Objectives

After completing this lesson, participants will be able to:

- Define HIPAA
- Explain how to remain compliant with HIPAA as a healthcare professional
- Define patient privacy
- Describe privileged communication

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) worksheet</i> • <i>Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) Instructor Resource</i> • <i>Safety, Privacy, and Confidentiality of Health Information Pre-Test</i> • <i>Safety, Privacy, and Confidentiality of Health Information Pre-Test – Answer Key</i>	1. Print/photocopy <i>Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) worksheet</i> (one per participant) 2. Print/photocopy <i>Safety, Privacy, and Confidentiality of Health Information Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Safety, Privacy, and Confidentiality of Health Information slide presentation</i> • <i>Safety, Privacy, and Confidentiality of Health Information Presentation Guide</i> • <i>Safety, Privacy, and Confidentiality of Health Information Presentation Guide – Answer Key</i>	1. Prepare <i>Safety, Privacy, and Confidentiality of Health Information slide presentation</i> for viewing 2. Print/photocopy <i>Safety, Privacy, and Confidentiality of Health Information Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• <i>Ethical and Legal Issues in Healthcare Student Workbook</i> • <i>Safety, Privacy, and Confidentiality of Health Information Post-Test</i> • <i>Safety, Privacy, and Confidentiality of Health Information Post-Test – Answer Key</i>	1. Print/photocopy <i>Safety, Privacy, and Confidentiality of Health Information Post-Test</i> (one per participant)	20 minutes

Lesson Four – Safety, Privacy, and Confidentiality of Health Information

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) worksheet*
- *Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) Instructor Resource*
- *Safety, Privacy, and Confidentiality of Health Information Pre-Test*
- *Safety, Privacy, and Confidentiality of Health Information Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy) Instructor Resource* page available.
3. Distribute the *Safety, Privacy, and Confidentiality of Health Information Pre-Test*.
4. Have the *Safety, Privacy, and Confidentiality of Health Information Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy)

Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Janie weighs 390 pounds and recently called 911 for leg pain. Janie's left leg was swollen so severely she could not walk. When the ambulance arrived, they called the fire department for assistance to move Janie into the ambulance. Janie was embarrassed and ashamed about her weight, and apologizes repeatedly, but everyone from the EMS responders to the hospital staff was pleasant and helpful.

The following day after being released from the hospital, an ambulance was called to transport Janie back home. On the way to her home, Janie heard the driver ask dispatch for a fire crew to meet them at her residence to assist with unloading Janie from the ambulance into her room. There was no mention of Janie's weight. When the fire crew arrived, Janie overheard one of the firefighters say to another as they were approaching, "Oh, that looks like the 400 pounder my wife told me about last night. She just came in as my wife was starting her shift at the hospital."

REFLECT on the situation:

What emotions do you think Janie is feeling after hearing the remark from the firefighter?

I believe Janie would feel hurt that the firefighter's wife talked about Janie behind her back and that they had discussed her weight, which she was ashamed of. I think Janie would feel even more embarrassed than before and angry that her private medical information was disclosed to someone who wasn't previously involved in her care.

Do you think Janie will report the firefighter's wife for a possible patient privacy and confidentiality violation?

I don't believe Janie would, even though she has every right to. I feel like Janie would be too embarrassed to make a scene and bring more attention to herself, and she might not want anyone to get in trouble, even though it hurt her feelings.

What emotions do you think the EMS responders feel when Janie apologizes for her weight?

I think the EMS responders would feel sad that Janie feels she has to apologize for her weight. I also think they would feel empathic and would be happy to assist her.

SHARE your thoughts with a peer when it's discussion time.

Safety, Privacy, and Confidentiality of Health Information (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Janie weighs 390 pounds and recently called 911 for leg pain. Janie's left leg was swollen so severely she could not walk. When the ambulance arrived, they called the fire department for assistance to move Janie into the ambulance. Janie was embarrassed and ashamed about her weight, and apologizes repeatedly, but everyone from the EMS responders to the hospital staff was pleasant and helpful.

The following day after being released from the hospital, an ambulance was called to transport Janie back home. On the way to her home, Janie heard the driver ask dispatch for a fire crew to meet them at her residence to assist with unloading Janie from the ambulance into her room. There was no mention of Janie's weight. When the fire crew arrived, Janie overheard one of the firefighters say to another as they were approaching, "Oh, that looks like the 400 pounder my wife told me about last night. She just came in as my wife was starting her shift at the hospital."

REFLECT on the situation:

What emotions do you think Janie is feeling after hearing the remark from the firefighter?

If you were Janie, would you report the firefighter's wife for a patient privacy and confidentiality violation?

What emotions do you think the EMS responders feel when Janie apologizes for her weight?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Safety, Privacy, and Confidentiality of Health Information Pre-Test

Select the best answer to the following multiple-choice questions:

1. What does the acronym HIPAA stand for?
 - a. Health Insurance Portability and Anonymity Act
 - b. Health Insurance Protection and Accountability Act
 - c. Health Insurance Portability and Availability Act
 - d. Health Insurance Portability and Accountability Act
2. Who issued the HIPAA Privacy Rule?
 - a. US Department of Health and Human Services (HHS)
 - b. US Federal Drug Administration (FDA)
 - c. Homeland Security
 - d. American Medical Association (AMA)
3. Which of these is **not** considered a covered entity?
 - a. Healthcare professionals
 - b. Business associates
 - c. Health plans
 - d. Pharmaceutical companies
4. What does PHI stand for?
 - a. Private health instructions
 - b. Protected health information
 - c. Personal health instructions
 - d. Private health information
5. Which of the following is **not** found in the HIPAA Privacy Rule?
 - a. The patient has the right to control how their PHI is used
 - b. Covered entities properly protect the patient's information
 - c. A medical power of attorney is used to protect the patient's PHI
 - d. Allows the flow of healthcare information needed to protect the patient's health and well-being

Safety, Privacy, and Confidentiality of Health Information Pre-Test – Answer Key

1. What does the acronym HIPAA stand for?
 - a. Health Insurance Portability and Anonymity Act
 - b. Health Insurance Protection and Accountability Act
 - c. Health Insurance Portability and Availability Act
 - d. Health Insurance Portability and Accountability Act**
2. Who issued the HIPAA Privacy Rule?
 - a. US Department of Health and Human Services (HHS)**
 - b. US Federal Drug Administration (FDA)
 - c. Homeland Security
 - d. American Medical Association (AMA)
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 - d. Private health information
5. Which of the following is **not** found in the HIPAA Privacy Rule?
 - a. The patient has the right to control how their PHI is used
 - b. Covered entities properly protect the patient's information
 - c. A medical power of attorney is used to protect the patient's PHI**
 - d. Allows the flow of healthcare information needed to protect the patient's health and well-being

Lesson Four – Safety, Privacy, and Confidentiality of Health Information

LEARN: Safety, Privacy, and Confidentiality of Health Information Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to HIPAA laws, maintaining compliance with HIPAA as a healthcare professional, and patient privacy and privileged communication guidelines.

Materials:

- *Safety, Privacy, and Confidentiality of Health Information* slide presentation
- *Safety, Privacy, and Confidentiality of Health Information Presentation Guide*
- *Safety, Privacy, and Confidentiality of Health Information Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Safety, Privacy, and Confidentiality of Health Information Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 4: Safety, Privacy, and Confidentiality of Health Information

Slide 2: The goals and objectives of this lesson are:

- Define HIPAA
- Explain how to remain compliant with HIPAA as a healthcare professional
- Define patient privacy
- Describe privileged communication

Slide 3: HIPAA is an acronym for the **Health Insurance Portability and Accountability Act**. This federal law was designed to provide privacy standards to protect patient's sensitive

health and medical information from being disclosed.

Slide 4: In addition to protecting patient's sensitive medical and health information, HIPAA does the following:

- Provides patients the ability to transfer and continue health insurance coverage when they change or lose their job
- Reduces healthcare abuse and fraud
- Mandates industry-wide standards for healthcare information and electronic billing
- Requires confidential protection and handling of sensitive, protected health information

Slide 5: The US Department of Health and Human Services (HHS) issued the HIPAA Privacy Rule to implement HIPAA requirements: This rule addresses protected health information (PHI) by covered entities, including healthcare professionals. The Privacy Rule ensures that patients receive high-quality healthcare while protecting their sensitive medical and health information.

Slide 6: Certain individuals and organizations are subject to the Privacy Rule, including:

- Healthcare professionals
- Health plans
- Healthcare clearinghouses
- Business associates

We will go into greater detail on the following slides.

Slide 7: All healthcare professionals who are paid to provide care are subject to the Privacy Rule, but *only* if they electronically transmit health information connected with covered transactions. Since most healthcare professionals transmit information electronically to receive

payment and process claims, most healthcare professionals are covered under HIPAA.

Slide 8: The costs of medical care are paid by health plans, including:

- Health insurance companies such as Blue Cross/Blue Shield
- Health maintenance organizations (HMOs)
- Government-funded plans such as Medicaid and Medicare
- Employer group health plans

Slide 9: A clearinghouse checks medical claims for errors, ensuring the claims are correctly processed in a standard format. Essentially, a healthcare clearinghouse is the go-between healthcare professionals and the insurance payers, usually without interacting with the patient. A healthcare clearinghouse can be a private or government entity.

Slide 10: Business associates can be a person or organization that is not a member of the covered entity's workforce. These business associates use or disclose individually identifiable patient information to perform or provide a function, activity, or service for the covered entity, including:

- Data analysis
- Billing
- Claims processing
- Utilization review

Slide 11: A covered entity may only disclose or use a patient's protected health information (PHI) if:

1. The HIPAA Privacy Rule specifically permits or requires it
2. The patient gives written authorization
3. For treatment, payment, and healthcare operations

Slide 12: The HIPAA Security Rule protects a subset of information covered by the Privacy Rule.

This subset is protected health information that a covered entity creates, maintains, receives, or transmits in electronic form, called "electronic protected health information (e-PHI). The Security Rule does not apply to PHI transmitted orally or in writing. To comply, all covered entities must do the following:

1. Ensure the confidentiality, integrity, and availability of all e-PHI.
2. Detect and safeguard against threats to the security of the information.
3. Protect against anticipated, impermissible use, or disclosures.
4. Certify workforce compliance.

If a covered entity is found in violation or non-compliance with HIPAA, the healthcare professional or organization can be charged hefty fines and penalties. The fines are determined by the severity of the breach and the number of violations that the covered entity had previously.

Slide 13: The patient has the right to decide how, when, and to what extent others can access their protected health information (PHI). Patient privacy laws cover the following:

- Maintains confidentiality of communication and sensitive health and medical information
- Shares PHI to provide medical care and treatment programs with other treating healthcare professionals
- If a patient's PHI is used for research purposes, researchers must obtain their informed consent

Slide 14: In the healthcare industry, privileged communication refers to "communication between a patient and healthcare professional that includes private information that is protected by federal, state, and local laws." This communication is confidential and the healthcare professional cannot be legally compelled to disclose the information as a witness. Privileged communications require the healthcare professional to take reasonable measures to protect the information, and patient data can only be shared under very specific circumstances. The following slide will cover guidelines to protect privileged communication.

Slide 15: In the healthcare industry, following these guidelines will help protect patient's privacy and the security of the information:

- Reasonable protection: take reasonable steps to provide digital and physical security of the patient's information; privileged conversations should be held in private
- Need-to-know basis: only healthcare professionals who need to know the

information to provide medical treatment should receive the information

- Disguise information: if the information is given to researchers, the patient's name should be removed
 - Privacy disclosures: provide disclosures, so patients understand how, why, and when their information is disclosed
 - Secure communications: all communications systems shall meet security standards and be safe from hacking, eavesdropping, and unauthorized access
2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Safety, Privacy, and Confidentiality of Health Information Presentation Guide

Complete the following information as you listen to the Safety, Privacy, and Confidentiality of Health Information presentation.

What is HIPAA?

HIPAA is an acronym for the _____

This federal law was designed to provide privacy standards to protect patients' sensitive health and medical information from being disclosed.

What Does HIPAA Do?

- Provides patients the ability to _____ and _____ health insurance coverage
- Reduces healthcare _____ and _____
- Mandates standards for healthcare information and electronic billing
- Requires confidential protection and handling of _____ health information

The HIPAA Privacy Rule

The US Department of Health and Human Services (HHS) issued the HIPAA Privacy Rule to implement HIPAA requirements.

- The patient has the _____ how their protected health information (PHI) is used
- The patient's information is properly _____ by covered entities
- Allows the flow of healthcare information needed to protect the patient's health and well-being

Covered Entities

The following are considered covered entities which are subject to the Privacy Rule:

- Healthcare _____
- _____
- Healthcare _____
- Business associates

Healthcare Professionals

All healthcare professionals who are paid to provide care are subject to the Privacy Rule, but only if they electronically transmit health information connected with covered transactions.

Health Plans

The costs of medical care are paid by health plans, including:

- Health insurance companies
- Health maintenance organizations (_____)
- Government-funded plans such as Medicaid and Medicare
- _____

Healthcare Clearinghouses

A clearinghouse checks medical claims for _____, ensuring the claims are correctly processed.

Essentially, a healthcare clearinghouse is the go-between _____ and _____.

Business Associates

Those who perform or provide a function, activity, or service for a covered entity, including:

- Data analysis
- _____
- Claims processing
- _____

Disclosures and Permitted Uses

A covered entity may only disclose or use a patient's protected health information (PHI) if:

- The _____ specifically permits or requires it
- The patient gives _____ authorization
- Treatment, payment, and healthcare operations

HIPAA Security Rule

The HIPAA Security Rule protects a subset of information covered by the _____.

Ethical and Legal Issues in Healthcare

This subset is protected health information a covered entity creates, maintains, receives, or transmits in electronic form, called “electronic protected health information (e-PHI).

To comply, all covered entities must do the following:

- Ensure the confidentiality of e-PHI
- Safeguard threats to the _____ of the information
- Protect against impermissible use
- Certify _____
- Failure to comply= hefty fines and penalties

Patient Privacy

The patient has the right to decide _____
_____ others can access their
protected health information (PHI). Patient privacy:

- Maintains _____
- Shares PHI to provide medical care
- Research purposes

Privileged Communication

In the healthcare industry, _____ refers to
“communication between a patient and healthcare professional that includes private information that is
protected by federal, state, and local laws.”

This communication is _____ and the healthcare professional
_____ be legally compelled to disclose the information as a witness.

Guidelines to Protect Privileged Communication

- Reasonable protection
- _____
- Disguise information
- _____
- Secure communications

Safety, Privacy, and Confidentiality of Health Information Presentation Guide – Answer Key

What is HIPAA?

HIPAA is an acronym for the **Health Insurance Portability and Accountability Act**.

This federal law was designed to provide privacy standards to protect patients' sensitive health and medical information from being disclosed.

What Does HIPAA Do?

- Provides patients the ability to **transfer** and **continue** health insurance coverage
- Reduces healthcare **abuse** and **fraud**
- Mandates standards for healthcare information and electronic billing
- Requires confidential protection and handling of **sensitive** health information

The HIPAA Privacy Rule

The US Department of Health and Human Services (HHS) issued the HIPAA Privacy Rule to implement HIPAA requirements.

- The patient has the **right to control** how their protected health information (PHI) is used
- The patient's information is properly **protected** by covered entities
- Allows the flow of healthcare information needed to protect the patient's health and well-being

Covered Entities

The following are considered covered entities which are subject to the Privacy Rule:

- Healthcare **professionals**
- **Health plans**
- Healthcare **clearinghouses**
- Business associates

Healthcare Professionals

All healthcare professionals who are paid to provide care are subject to the Privacy Rule, but only if they electronically transmit health information connected with covered transactions.

Health Plans

The costs of medical care are paid by health plans, including:

- Health insurance companies
- Health maintenance organizations (**HMOs**)
- Government-funded plans such as Medicaid and Medicare
- **Employer group health plans**

Healthcare Clearinghouses

A clearinghouse checks medical claims for **errors**, ensuring the claims are correctly processed.

Essentially, a healthcare clearinghouse is the go-between **healthcare professionals and the insurance payers**.

Business Associates

Those who perform or provide a function, activity, or service for a covered entity, including:

- Data analysis
- **Billing**
- Claims processing
- **Utilization review**

Disclosures and Permitted Uses

A covered entity may only disclose or use a patient's protected health information (PHI) if:

- The **HIPAA Privacy Rule** specifically permits or requires it
- The patient gives **written** authorization
- Treatment, payment, and healthcare operations

HIPAA Security Rule

The HIPAA Security Rule protects a subset of information covered by the **Privacy Rule**.

This subset is protected health information a covered entity creates, maintains, receives, or transmits in electronic form, called "electronic protected health information (e-PHI).

To comply, all covered entities must do the following:

- Ensure the confidentiality of e-PHI
- Safeguard threats to the **security** of the information
- Protect against impermissible use
- **Certify workforce compliance**
- Failure to comply= hefty fines and penalties

Patient Privacy

The patient has the right to decide **how, when and to what extent** others can access their protected health information (PHI). Patient privacy:

- Maintains **confidentiality**
- Shares PHI to provide medical care
- Research purposes

Privileged Communication

In the healthcare industry, **privileged communication** refers to "communication between a patient and healthcare professional that includes private information that is protected by federal, state, and local laws."

This communication is **confidential**, and the healthcare professional **cannot** be legally compelled to disclose the information as a witness.

Guidelines to Protect Privileged Communication

- Reasonable protection
- **Need-to-know basis**
- Disguise information
- **Privacy disclosures**
- Secure communications

Lesson Four – Safety, Privacy, and Confidentiality of Health Information

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on the safety, privacy, and confidentiality of health information. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Safety, Privacy, and Confidentiality of Health Information Pre-Test*
- *Safety, Privacy, and Confidentiality of Health Information Pre-Test – Answer Key*

Facilitation Steps:

1. Have participants pair up. One person will investigate how a fire department in your city follows HIPPA compliance while the other will investigate how a local hospital follows compliance. Compare the two. Are there any differences?
2. Have participants complete the student workbook pages: *Privileged Communication* and *HIPAA Settlement Example*.
3. Instruct participants to take a few minutes to complete the post-test.
4. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Safety, Privacy, and Confidentiality of Health Information Post-Test

Select the best answer to the following multiple-choice questions:

1. What does the acronym HIPAA stand for?
 - a. Health Insurance Portability and Anonymity Act
 - b. Health Insurance Protection and Accountability Act
 - c. Health Insurance Portability and Availability Act
 - d. Health Insurance Portability and Accountability Act
2. Who issued the HIPAA Privacy Rule?
 - a. US Department of Health and Human Services (HHS)
 - b. US Federal Drug Administration (FDA)
 - c. Homeland Security
 - d. American Medical Association (AMA)
3. Which of these is **not** considered a covered entity?
 - a. Healthcare professionals
 - b. Business associates
 - c. Health plans
 - d. Pharmaceutical companies
4. What does PHI stand for?
 - a. Private health instructions
 - b. Protected health information
 - c. Personal health instructions
 - d. Private health information
5. Which of the following is **not** found in the HIPAA Privacy Rule?
 - a. The patient has the right to control how their PHI is used
 - b. Covered entities properly protect the patient's information
 - c. A medical power of attorney is used to protect the patient's PHI
 - d. Allows the flow of healthcare information needed to protect the patient's health and well-being

Safety, Privacy, and Confidentiality of Health Information Post-Test – Answer Key

1. What does the acronym HIPAA stand for?
 - a. Health Insurance Portability and Anonymity Act
 - b. Health Insurance Protection and Accountability Act
 - c. Health Insurance Portability and Availability Act
 - d. Health Insurance Portability and Accountability Act**
2. Who issued the HIPAA Privacy Rule?
 - a. US Department of Health and Human Services (HHS)**
 - b. US Federal Drug Administration (FDA)
 - c. Homeland Security
 - d. American Medical Association (AMA)
3. Which of these is **not** considered a covered entity?
 - a. Healthcare professionals
 - b. Business associates
 - c. Health plans
 - d. Pharmaceutical companies**
4. What does PHI stand for?
 - a. Private health instructions
 - b. Protected health information**
 - c. Personal health instructions
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5. Which of the following is **not** found in the HIPAA Privacy Rule?
 - a. The patient has the right to control how their PHI is used
 - b. Covered entities properly protect the patient's information
 - c. A medical power of attorney is used to protect the patient's PHI**
 - d. Allows the flow of healthcare information needed to protect the patient's health and well-being

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Lesson Five – Social Media and Healthcare

Lesson Overview

In this lesson, participants will learn the definition of and different types of social media, the effectiveness and risks of social media in the healthcare setting, and common-sense guidelines to follow.

Lesson Objectives

After completing this lesson, participants will be able to:

- Define social media
- Explain effective uses of social media in the healthcare setting
- Describe associated risks of social media
- Explain common sense guidelines to follow when using social media in the healthcare setting

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Social Media and Healthcare (Focus on Empathy)</i> worksheet • <i>Social Media and Healthcare (Focus on Empathy) Instructor Resource</i> • <i>Social Media and Healthcare Pre-Test</i> • <i>Social Media and Healthcare Pre-Test – Answer Key</i>	1. Print/photocopy <i>Social Media and Healthcare (Focus on Empathy)</i> worksheet (one per participant) 2. Print/photocopy <i>Social Media and Healthcare Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Social Media and Healthcare</i> slide presentation • <i>Social Media and Healthcare Presentation Guide</i> • <i>Social Media and Healthcare Presentation Guide – Answer Key</i>	1. Prepare <i>Social Media and Healthcare</i> slide presentation for viewing 2. Print/photocopy <i>Social Media and Healthcare Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• Ethical and Legal Issues in Healthcare Student Workbook • <i>Social Media and Healthcare Post-Test</i> • <i>Social Media and Healthcare Post-Test – Answer Key</i>	1. Print/photocopy <i>Social Media and Healthcare Post-Test</i> (one per participant)	20 minutes

Lesson Five – Social Media and Healthcare

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Social Media and Healthcare (Focus on Empathy) worksheet*
- *Social Media and Healthcare (Focus on Empathy) Instructor Resource*
- *Social Media and Healthcare Pre-Test*
- *Social Media and Healthcare Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Social Media and Healthcare (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Social Media and Healthcare (Focus on Empathy) Instructor Resource* page available.
3. Distribute the *Social Media and Healthcare Pre-Test*.
4. Have the *Social Media and Healthcare Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Social Media and Healthcare

(Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Erica has wanted to be a nurse since she was ten years old. She was injured in a car accident and still remembers how kind the nurses were during her three-week stay in the hospital. After two years of working on her nursing school prerequisites, Erica has been accepted into a nursing program. Erica's parents are ecstatic and offer to pay for her nursing school as a graduation gift. Little does she know that her social media posts will cause her to be expelled from the program.

One year into her schooling, Erica received an email from Connie, the head of the nursing program, who said she needed to speak with her immediately. Erica asked what the meeting was about, but Connie said she would find out when they met. An hour later, Erica met with Connie and the school's dean, who told Erica she was being removed from the program for conduct unbecoming to the profession and the school's code of conduct. Connie showed a printout to Erica highlighting some comments she made on her Instagram and Facebook accounts regarding "getting wasted" on the weekends and how that was the only way she could get through the nursing program. There were also photos of Erica with some friends with drinks in their hands, in sexually suggestive poses. Erica was told that she needed to pack up her books and immediately leave the premises. Erica tried explaining how her posts did not negatively affect her studies or the nursing program, but was told that she agreed to the School's Code of Conduct when she registered and she violated the code.

REFLECT on the situation:

What emotions do you think Erica is feeling after being told she was expelled from the program?

I believe Erica would be in disbelief that she was expelled from the program. I think she would feel angry, sad, and frustrated with herself for posting those pictures and comments for all to see.

Do you think the school has the right to remove Erica from the program?

While I think the punishment is harsh for what Erica posted, if she signed an agreement that she would follow the School's Code of Conduct and she violated it, then I believe the school has the right to remove her from the program.

How do you think Erica's parents will feel when she tells them she got expelled?

I think her parents will be shocked that she was expelled. I also think they will feel angry about the situation and feel sad for Erica. They may also feel disappointed with Erica that she wasn't more aware of how her posts could damage her career.

SHARE your thoughts with a peer when it's discussion time.

Social Media and Healthcare

(Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Erica has wanted to be a nurse since she was ten years old. She was injured in a car accident and still remembers how kind the nurses were during her three-week stay in the hospital. After two years of working on her nursing school prerequisites, Erica has been accepted into a nursing program. Erica's parents are ecstatic and offer to pay for her nursing school as a graduation gift. Little does she know that her social media posts will cause her to be expelled from the program.

One year into her schooling, Erica received an email from Connie, the head of the nursing program, who said she needed to speak with her immediately. Erica asked what the meeting was about, but Connie said she would find out when they met. An hour later, Erica met with Connie and the school's dean, who told Erica she was being removed from the program for conduct unbecoming to the profession and the school's code of conduct. Connie showed a printout to Erica highlighting some comments she made on her Instagram and Facebook accounts regarding "getting wasted" on the weekends and how that was the only way she could get through the nursing program. There were also photos of Erica with some friends with drinks in their hands, in sexually suggestive poses. Erica was told that she needed to pack up her books and immediately leave the premises. Erica tried explaining how her posts did not negatively affect her studies or the nursing program, but was told that she agreed to the School's Code of Conduct when she registered and she violated the code.

REFLECT on the situation:

What emotions do you think Erica is feeling after being told she was expelled from the program?

Do you think the school has the right to remove Erica from the program?

What emotions do you think Connie is feeling while telling Erica she needs to leave?

How do you think Erica's parents will feel when she tells them she got expelled?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Social Media and Healthcare Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as an effective use of social media?
 - a. Patient care
 - b. Marketing services
 - c. Online dating
 - d. Professional networking
2. What is the **primary** reason many healthcare professionals are hesitant to use social media?
 - a. They do not have time
 - b. They do not think it is effective
 - c. They don't want to mix business and their personal life
 - d. They are concerned with violating their patients' rights
3. Which site is best known for professional networking?
 - a. LinkedIn
 - b. Twitter
 - c. Facebook
 - d. Instagram
4. What type of accurate, up-to-date information can healthcare professionals share to educate their patients?
 - a. Public information
 - b. Protected health information
 - c. Evidence-based information
 - d. Private health information
5. Why is it recommended to have personal and professional social media accounts?
 - a. It keeps the healthcare professionals' image from being damaged
 - b. It is a requirement of the American Medical Association
 - c. Employers require their employees to have separate accounts
 - d. It keeps the healthcare professional from being sued

Social Media and Healthcare Pre-Test – Answer Key

1. Which of these is **not** mentioned as an effective use of social media?
 - a. Patient care
 - b. Marketing services
 - c. Online dating**
 - d. professional networking
2. What is the **primary** reason many healthcare professionals are hesitant to use social media?
 - a. They do not have time
 - b. They do not think it is effective
 - c. They don't want to mix business and their personal life
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 - c. Facebook
 - d. Instagram
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 - a. It keeps the healthcare professionals' image from being damaged**
 - b. It is a requirement of the American Medical Association
 - c. Employers require their employees to have separate accounts
 - d. It keeps the healthcare professional from being sued

Lesson Five – Social Media and Healthcare

LEARN: Social Media and Healthcare Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to social media as well as its effective uses and associated risks when used in the healthcare setting. Participants will learn common sense guidelines to protect themselves when social media is used in healthcare.

Materials:

- *Social Media and Healthcare* slide presentation
- *Social Media and Healthcare Presentation Guide*
- *Social Media and Healthcare Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Social Media and Healthcare Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 5: Social Media and Healthcare

Slide 2: The goals and objectives of this lesson are:

- Define social media
- Explain effective uses of social media in a healthcare setting
- Describe associated risks of social media
- Explain common sense guidelines to follow when using social media in a healthcare setting

Slide 3: Social media is generally referred to as an internet-based tool used to share information, images, personal messages, and other content. Social media is used to build communities where individuals can communicate with others. Many people think social media are only apps such as

Facebook, Twitter, and Instagram. However, other sites such as LinkedIn, Wikipedia, and YouTube are considered forms of social media. Starting with the most popular, social media includes:

- Social networking sites (Twitter, Facebook, etc.)
- Professional networking (LinkedIn)
- Media sharing (YouTube)
- Blogs
- Information (Wikipedia)
- Virtual reality and gaming sites

Slide 4: Social media has been effective in providing patient care. It is used for professional networking, patient education and public health programs, and marketing services for an individual or organization to market their services. We will go into greater detail in the following slides.

Slide 5: While most healthcare professionals are hesitant to use social media for patient care, citing possible patient rights violations, more and more healthcare professionals are discovering the value of using social media. Some of the reasons for using social media for patient care include:

- Asking questions: patients can ask their healthcare provider quick questions or ask for a refill of their medication
- Patient education: healthcare professionals can send their patients information about their medical condition
- Health monitoring: healthcare professionals can monitor patient health and schedule routine exams and physicals
- Encourages behavioral changes: using social media, healthcare providers can encourage positive behavioral changes such as weight loss, decreasing alcohol consumption, or quitting smoking.

Slide 6: In addition to LinkedIn, which connects all types and specialties of healthcare professionals, professional networking has the following benefits:

- Allows healthcare professionals to communicate with colleagues regarding complex medical or patient issues
- Offers crowdsourcing, which is asking questions or opinions in a community of healthcare professionals and using their skills and knowledge to gather information and solve problems
- Healthcare professionals in less developed countries can connect with specialists in more advanced parts of the world (for example, a medical procedure can be streamed live to less developed countries, and the healthcare providers can observe and ask questions)

Slide 7: Using social media, patients have better access to healthcare information and other educational resources. Healthcare professionals can offer evidence-based information so that patients receive accurate, up-to-date information. Patients can connect with others to offer resources, set goals, track personal progress, and receive moral support. Disease-specific forums help distribute information about a particular disease or condition and support fundraising for individuals and organizations.

Slide 8: With social media spanning global networks, information can quickly be relayed to the public. Public health departments can monitor outbreaks such as the flu and warn the public about the precautions they need to take. During mass casualty incidents such as an earthquake, flood, or hurricane, organizations like the Red Cross and FEMA can adequately prepare for their patients' needs. Many organizations use social media platforms to bring awareness to the public about donating blood and organs. With the public being a highly social group, many posts can be shared and sent across these vast global networks.

Slide 9: Studies have shown that hospitals, clinics, and healthcare professionals who use social media as a marketing tool are highly effective. Here are some reasons:

- Better visibility: by using social media to market a service or specific healthcare provider, visibility is increased, and their image is enhanced by creating familiarity
- Creates trust: when a patient sees an image of a hospital or a particular healthcare professional, it creates a sense of trust; people would rather go to a person or facility that seems familiar and who they feel they can trust
- Cutting-edge technologies: 81% of people who were questioned in a study reported if a hospital had a strong social media influence, it led them to believe the facility used cutting-edge technologies
- Educational tools: many nonprofit healthcare organizations have started using social media to provide educational videos and blogs to the public

Slide 10: In addition to the benefits, there are also risks for healthcare professionals who use social media. Such as:

- Damage to the providers' professional image happens when healthcare professionals post content or photos that can be deemed unprofessional; this could include vacation photos, party pictures, or religious or political views or beliefs
- The main reason healthcare professionals are hesitant to use social media is they are concerned with a breach of patient privacy; under the HIPAA act and state privacy laws, healthcare professionals in violation could be found liable, fined, and have their license revoked
- It is not advised for healthcare professionals and their patients to have a social relationship outside of their patient-healthcare provider boundary
- Healthcare professionals can face disciplinary action by the state licensing board for unprofessional behavior or conduct related to social media; the licensing board can use the information found on social media to make a ruling, with the possibility of a healthcare professional having their license revoked (legal issues can range from a healthcare professional violating their patients' rights or giving medical advice online)

Slide 11: Social media can be an excellent tool for healthcare professionals to use. Here are some commonsense guidelines to avoid the risks:

- Have personal and professional accounts to avoid damaging your professional image; have the personal account set to friends and family only and remain professional on your personal page
 - Stay secure by placing security guidelines in place on any social media platform, such as by limiting who has access to these sites; have a system in place to revoke access if needed
 - Be compliant by following HIPAA rules and regulations and never share a patient's identifying information on any social network unless they have given you written permission; there are also FDA rules about advertising that you need to comply with
 - Educate your patients and others by providing accurate, relevant information without offering medical advice
2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Social Media and Healthcare Presentation Guide

Complete the following information as you listen to the Social Media and Healthcare presentation.

What is Social Media?

Social networking sites (Twitter, Facebook, etc.)

Professional networking (LinkedIn)

Media sharing (YouTube)

_____ (Wikipedia)

Virtual reality and gaming sites

Effective Uses of Social Media

- _____
- Professional networking
- _____
- Public health programs
- Marketing services

Patient Care

- _____
- Patient education
- _____
- Encourages behavioral changes

Professional Networking

In addition to LinkedIn, which connects all types and specialties of healthcare professionals, professional networking has the following benefits:

- Communicate with colleagues
- Crowdsourcing
- Connect with _____

Patient Education

- Evidence-based information
- _____
- Disease specific forums
- _____

Public Health Programs

- Global networks
- Monitor _____
- _____ events
- Donor pledges

Marketing Services

Studies have shown that hospitals, clinics, and healthcare professionals who use social media as a marketing tool are highly effective. Here are some reasons:

- 1.
- 2.
- 3.
- 4.

Risks of Social Media

- Damage to professional image
- Breach of _____
- Violation of _____
- Licensing or legal concerns

Common Sense Guidelines

Social media can be a great tool for healthcare professionals to use. Here are some guidelines to avoid the risks:

- Have _____ and _____ accounts
- Stay _____
- Be _____
- Educate

Social Media and Healthcare

Presentation Guide – Answer Key

What is Social Media?

Social networking sites (Twitter, Facebook, etc.)

Professional networking (LinkedIn)

Media sharing (YouTube)

Blogs

Information (Wikipedia)

Virtual reality and gaming sites

Effective Uses of Social Media

- **Patient care**
- Professional networking
- **Patient education**
- Public health programs
- Marketing services

Patient Care

- **Ask questions**
- Patient education
- **Health monitoring**
- Encourages behavioral changes

Professional Networking

In addition to LinkedIn, which connects all types and specialties of healthcare professionals, professional networking has the following benefits:

- Communicate with colleagues
- Crowdsourcing
- Connect with **less developed countries**

Patient Education

- Evidence-based information
- **Connect with others**
- Disease specific forums
- **Fundraising**

Public Health Programs

Global networks

Monitor **outbreaks**

Mass casualty events

Donor pledges

Marketing Services

Studies have shown that hospitals, clinics, and healthcare professionals who use social media as a marketing tool are highly effective. Here are some reasons:

1. **Better visibility**
2. **Creates trust**
3. **Cutting-edge technologies**
4. **Educational tools**

Risks of Social Media

- Damage to professional image
- Breach of **privacy**
- Violation of **boundaries**
- Licensing or legal concerns

Common Sense Guidelines

Social media can be a great tool for healthcare professionals to use. Here are some guidelines to avoid the risks:

- Have **personal** and **professional** accounts
- Stay **secure**
- Be **compliant**
- Educate

Lesson Five – Social Media and Healthcare

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on social media and healthcare. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Social Media and Healthcare Post-Test*
- *Social Media and Healthcare Post-Test – Answer Key*

Facilitation Steps:

1. Divide the class into small groups with access to the Internet. Find a social media policy for a local hospital or clinic where you live. Write seven policies that employees must follow regarding the use of social media.
2. Bring the class back together and share the policies that participants have found. Make a master list on a whiteboard.
3. Have participants complete the following student workbook pages: Misusing Social Media and Social Media Self-Audit.
4. Instruct participants to take a few minutes to complete the post-test.
5. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Social Media and Healthcare Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as an effective use of social media?
 - a. Patient care
 - b. Marketing services
 - c. Online dating
 - d. Professional networking
2. What is the **primary** reason many healthcare professionals are hesitant to use social media?
 - a. They do not have time
 - b. They do not think it is effective
 - c. They don't want to mix business and their personal life
 - d. They are concerned with violating their patient's rights
3. Which site is best known for professional networking?
 - a. LinkedIn
 - b. Twitter
 - c. Facebook
 - d. Instagram
4. What type of accurate, up-to-date information can healthcare professionals share to educate their patients?
 - a. Public information
 - b. Protected health information
 - c. Evidence-based information
 - d. Private health information
5. Why is it recommended to have personal and professional social media accounts?
 - a. It keeps the healthcare professional's image from being damaged
 - b. It is a requirement of the American Medical Association
 - c. Employers require their employees to have separate accounts
 - d. It keeps the healthcare professional from being sued

Social Media and Healthcare Post-Test – Answer Key

1. Which of these is **not** mentioned as an effective use of social media?
 - a. Patient care
 - b. Marketing services
 - c. Online dating**
 - d. professional networking
2. What is the **primary** reason many healthcare professionals are hesitant to use social media?
 - a. They do not have time
 - b. They do not think it is effective
 - c. They don't want to mix business and their personal life
 - d. They are concerned with violating their patient's rights**
3. Which site is best known for professional networking?
 - a. LinkedIn**
 - b. Twitter
 - c. Facebook
 - d. Instagram
4. What type of accurate, up-to-date information can healthcare professionals share to educate their patients?
 - a. Public information
 - b. Protected health information
 - c. Evidence-based information**
 - d. Private health information
5. Why is it recommended to have personal and professional social media accounts?
 - a. It keeps the healthcare professional's image from being damaged**
 - b. It is a requirement of the American Medical Association
 - c. Employers require their employees to have separate accounts
 - d. It keeps the healthcare professional from being sued

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3. Hanners, David. (2015, November 7). *Student Expelled From Brainerd Nursing School for Facebook Comments Sues*. Retrieved from <https://www.twincities.com/2013/02/16/student-expelled-from-brainerd-nursing-school-for-facebook-comments-sues/>

Lesson Six – Ethical Foundations

Lesson Overview

In this lesson, participants will learn the definition and principles of ethical foundations, distinguish between bioethics and healthcare ethics, describe the impact of virtue ethics and religion in healthcare, and explain situational ethics in a healthcare setting.

Lesson Objectives

After completing this lesson, participants will be able to:

- Define ethical foundations
- Distinguish between bioethics and healthcare ethics
- Explain the principles of ethics
- Describe the impact of virtue ethics and religion in healthcare
- Explain situational ethics in the healthcare setting

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS:	• <i>Ethical Foundations (Focus on Empathy)</i> worksheet • <i>Ethical Foundations (Focus on Empathy) Instructor Resource</i> • <i>Ethical Foundations Pre-Test</i> • <i>Ethical Foundations Pre-Test – Answer Key</i>	1. Print/photocopy <i>Ethical Foundations (Focus on Empathy)</i> worksheet (one per participant) 2. Print/photocopy <i>Ethical Foundations Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Ethical Foundations</i> slide presentation • <i>Ethical Foundations Presentation Guide</i> • <i>Ethical Foundations Presentation Guide – Answer Key</i>	1. Prepare <i>Ethical Foundations</i> slide presentation for viewing 2. Print/photocopy <i>Ethical Foundations Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• Ethical and Legal Issues in Healthcare Student Workbook • <i>Ethical Foundations Post-Test</i> • <i>Ethical Foundations Post-Test – Answer Key</i>	1. Print/photocopy <i>Ethical Foundations Post-Test</i> (one per participant)	20 minutes

Lesson Six – Ethical Foundations

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Ethical Foundations (Focus on Empathy)* worksheet
- *Ethical Foundations (Focus on Empathy)* Instructor Resource
- *Ethical Foundations Pre-Test*
- *Ethical Foundations Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Ethical Foundations (Focus on Empathy)* worksheets prior to or at the beginning of class.
2. Have the *Ethical Foundations (Focus on Empathy)* Instructor Resource page available.
3. Distribute the *Ethical Foundations Pre-Test*.
4. Have the *Ethical Foundations Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Ethical Foundations (Focus on Empathy)

Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Doctor Morgan has a 72-year-old patient named Harry, who was diagnosed with a rare form of cancer and has been given approximately three months to live. There is a new medication and treatment program that Doctor Morgan offered Harry which could extend his life for another year or two, but his medical insurance would not cover the expensive treatment. Doctor Harry said he would check back with Harry in a day or two, so he can discuss this new option with his family. Several days later, Doctor Morgan met with Harry and asked what he and his family decided. Harry said he thought it over and did not want to involve his family in the decision because they would want him to accept the treatment, but financially it would ruin them. Harry decided to forgo the treatment so his wife would not lose their house or their savings. Harry wants her to have that security when he passes.

REFLECT on the situation:

What emotions do you think Harry feels after being told there was a treatment program that could extend his life?

I think Harry would have conflicting emotions. I think he would feel hopeful there was a new program that could extend his life, but defeated upon hearing it was expensive and his insurance would not cover it.

Do you think Harry should have involved his family in the decision?

I think Harry has the right to decide what is best for him and his family. I understand Harry wanting to take care of his wife even after he passes and does not want to create a financial burden for her.

How do you think Doctor Morgan feels after hearing Harry's refusal of the treatment?

I think Doctor Morgan would feel sad that Harry decided to forgo the treatment but understands that Harry needs to determine what is best for him and his family.

SHARE your thoughts with a peer when it's discussion time.

Ethical Foundations (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Doctor Morgan has a 72-year-old patient named Harry, who was diagnosed with a rare form of cancer and has been given approximately three months to live. There is a new medication and treatment program that Doctor Morgan offered Harry, which could extend his life for another year or two, but his medical insurance would not cover the expensive treatment. Doctor Morgan said he would check back with Harry in a day or two, so he can discuss this new option with his family. Several days later, Doctor Morgan met with Harry and asked what he and his family decided. Harry said he thought it over and did not want to involve his family in the decision because they would want him to accept the treatment, but financially it would ruin them. Harry decided to forgo the treatment so his wife would not lose their house or their savings. Harry wants her to have that security when he passes.

REFLECT on the situation:

What emotions do you think Harry feels after being told there was a treatment program that could extend his life?

Do you think Harry should have involved his family in the decision?

How do you think Doctor Morgan feels after hearing Harry's refusal of the treatment?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Ethical Foundations Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which is of these **not** mentioned as a religious impact on healthcare?
 - a. Language barrier
 - b. Medicines
 - c. Strict prayer time
 - d. Diet
2. What is meant by a healthcare professional having a strong moral compass?
 - a. They do not condone colleagues' bad behavior
 - b. They take into consideration a patient's religious beliefs
 - c. They will act the same in every situation
 - d. They can judge right from wrong and act accordingly
3. Which is the definition of beneficence?
 - a. The duty to prevent harm
 - b. The duty to try to bring about benefit to the patient
 - c. The respect for autonomy
 - d. The administration of justice
4. Which of these is **not** one of the four principles of ethics?
 - a. Beneficence
 - b. Respect for justice
 - c. Justice
 - d. Religious freedom
5. Which is the principle of nonmaleficence?
 - a. The duty to respond
 - b. The duty to provide a benefit to the patient
 - c. The duty to prevent harm
 - d. The duty to provide comfort

Ethical Foundations Pre-Test – Answer Key

1. Which of these is **not** mentioned as a religious impact on healthcare?
 - a. **Language barrier**
 - b. Medicines
 - c. Strict prayer time
 - d. Diet
2. What is meant by a healthcare professional having a strong moral compass?
 - a. They do not condone colleagues' bad behavior
 - b. They take into consideration a patient's religious beliefs
 - c. They will act the same in every situation
 - d. **They can judge right from wrong and act accordingly**
3. Which is the definition of beneficence?
 - a. The duty to prevent harm
 - b. **The duty to try to bring about benefit to the patient**
 - c. The respect for autonomy
 - d. The administration of justice
4. Which of these is **not** one of the four principles of ethics?
 - a. Beneficence
 - b. Respect for justice
 - c. Justice
 - d. **Religious freedom**
5. Which is the principle of nonmaleficence?
 - a. The duty to respond
 - b. The duty to provide a benefit to the patient
 - c. **The duty to prevent harm**
 - d. The duty to provide comfort

Lesson Six – Ethical Foundations

LEARN: Ethical Foundations Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to ethical foundations. Participants will learn about situational ethics and the impact of virtue ethics and religion in healthcare.

Materials:

- *Ethical Foundations* slide presentation
- *Ethical Foundations Presentation Guide*
- *Ethical Foundations Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Ethical Foundations Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 6: Ethical Foundations

Slide 2: The goals and objectives of this lesson are:

- Define ethical foundations
- Distinguish between bioethics and healthcare ethics
- Explain the principles of ethics
- Describe the impact of virtue ethics and religion in healthcare
- Explain situational ethics in the healthcare setting

Slide 3: Ethics is “the branch of philosophy dealing with values relating to human conduct.” The foundation of ethics is how individuals’ personal values guide them between right and wrong and good and bad. Ethics also looks at the motives and outcomes behind certain actions.

Slide 4: Bioethics is “the study of the ethical issues emerging from advances in biology and

medicine.” This field of study examines controversial issues due to advancements in science and technology, such as human cloning and euthanasia. Bioethics is a multidisciplinary field considering the relationships between biotechnology, science, politics, medicine, law, philosophy, and various other areas.

Slide 5: Healthcare ethics, also known as medical ethics, is the area of bioethics that focuses on controversial issues in healthcare, including:

- Clinical trials
- Clinical research
- Public health

These issues can be controversial because clinical trials and research are necessary to improve public health by finding what is safe to use to effectively prevent disease. There is ethical controversy about clinical trials used on humans to research the knowledge needed to help others.

Slide 6: There are 4 guiding principles of ethics in healthcare:

1. Respect for autonomy
2. Beneficence
3. Nonmaleficence
4. Justice

We will cover each principle in greater detail in the following slides.

Slide 7: Patients have the right to make their own decisions and have their choices be respected. Their decisions should be made with a clear understanding of the benefits and risks involved, and without outside influence.

Slide 8: Beneficence is “the duty to try to bring about benefit to the patient.” The ethical principle of beneficence is the obligation of a healthcare professional to act for the benefit of the patient. The principle also supports several

moral rules: to prevent harm, defend and protect others' rights, rescue those in danger, and remove conditions that will cause harm.

Slide 9: The principle of nonmaleficence is “the duty to prevent harm.” It is closely associated with the Hippocrates saying “*primum non nocere*,” or “first, do no harm.” All healthcare professionals are taught to consider the possible harm that a procedure or intervention can cause, and to evaluate the risks versus the benefits.

Slide 10: The principle of justice defines fairness and equity in treatment, and that healthcare services are provided equitably throughout society. In addition to the patient being treated fairly, the healthcare organization and healthcare professional must also be treated fairly. For example, it is not fair if a patient cannot pay their bill for a service that was provided and the healthcare professional or organization pays for the procedure.

Slide 11: Virtue is defined as “behavior showing high moral standards.” A virtuous healthcare professional has a strong moral compass, meaning they can judge what is right from wrong and act accordingly. In virtue ethics, the healthcare professional is concerned with the **whole** of a patient's life rather than a particular episode or action. Virtue ethics “investigates how a healthcare professional's good moral character enables them to promote the good for the patient.” Studies have proven that while it is difficult for every healthcare professional to have the same virtues, most medical professionals have many of the same moral standards and are concerned with what is best for their patients.

Slide 12: The most significant impact religion has on healthcare is patients' religious beliefs and outcomes. A majority of patients seeking care factor in religious and spiritual beliefs when making major medical decisions. Some healthcare professionals may not consider these beliefs when developing a treatment plan,

negatively affecting their patients' outcomes. Healthcare professionals must realize how these beliefs can impact their patients' outcome in various ways:

- Medical decisions: patients often turn to their religious and spiritual beliefs when making medical decisions
- Gender preference of the healthcare provider: these same beliefs may impact the preferred gender of their healthcare provider
- Diet: some religions have specific foods they cannot eat, or will not consume medicines based on animal products
- Strict prayer times: some religions have strict prayer times that can interfere with medical procedures or treatment

Slide 13: Situational ethics, also called **contextualism**, follows the belief that right and wrong depend upon the situation. Situational ethics teaches that healthcare professionals' ethical decisions should follow flexible guidelines on a case-by-case basis, since every patient's situation is unique. Situational ethics does not believe that there are universal moral rights or rules and rejects “prefabricated decisions and prescriptive rules.” For example, a rural EMS unit happens upon an accident with multiple vehicles. There are four victims, two older adults who appear to be in their eighties and a pregnant mother and her toddler in the back seat. All four patients are unresponsive, and the closest assistance from other EMS responders is 30 minutes away. Life flight is 10 minutes away, but there are only two paramedics, so they need to choose which patients to resuscitate. They might choose the pregnant mother and her toddler since they might be more viable than the older couple. It is a situation they do not like to be put in, but they need to be flexible in this unique circumstance.

2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Ethical Foundations Presentation Guide

Complete the following information as you listen to the Ethical Foundations presentation.

What Are Ethical Foundations?

Ethics is _____
_____.

The foundation of ethics is how an individual's _____ guide them between right and wrong and good and bad.

What is Bioethics?

Bioethics is _____
_____.

This field of study examines controversial issues due to the advancements in _____ and _____, such as human cloning and euthanasia.

Healthcare Ethics

Healthcare ethics, also known as _____, is the area of bioethics that focuses on controversial issues in healthcare, including:

- Clinical trials
- _____
- Public Health

The 4 Principles of Ethics

1. Respect for autonomy
2. _____
3. Nonmaleficence
4. _____

Respect for Autonomy

Patients have the right to _____ and have their choices be respected.

Beneficence

Beneficence is _____
_____.

The ethical principle of beneficence is the obligation of a healthcare professional to act for the benefit of the patient.

Nonmaleficence

The principle of nonmaleficence is “the duty to _____ harm.”

It is closely associated with the Hippocrates saying “*primum non nocere*,” or
“_____.”

Justice

The principle of justice defines _____ and _____ in treatment.

In addition to the patient being treated fairly, the healthcare organization and healthcare professional must also be treated _____.

The Impact of Virtue Ethics in Healthcare

Virtue is defined as _____.

A virtuous healthcare professional has a strong moral compass, meaning they can judge what is right from wrong and act accordingly.

In virtue ethics, the healthcare professional is concerned with the _____ of a patient’s life, rather than a _____ episode or action.

The Impact of Religion in Healthcare

The greatest impact religion has in healthcare is due to patient’s _____.

Healthcare professionals must realize how these beliefs can impact their patient’s outcome:

- Medical decisions
- _____ of the healthcare provider
- Diet
- _____
- Strict prayer times

Situational Ethics

Situational ethics, also called _____, follows the belief that right and wrong depend upon the situation.

Situational ethics teaches that healthcare professionals ethical decisions should follow _____ on a case-by-case basis since every patient’s situation is unique.

Ethical Foundations Presentation Guide – Answer Key

What Are Ethical Foundations?

Ethics is “the branch of philosophy dealing with values relating to human conduct.”

The foundation of ethics is how an individual’s **personal values** guide them between right and wrong and good and bad.

What is Bioethics?

Bioethics is “the study of the ethical issues emerging from advances in biology and medicine.”

This field of study examines controversial issues due to the advancements in **science** and **technology**, such as human cloning and euthanasia.

Healthcare Ethics

Healthcare ethics, also known as **medical ethics**, is the area of bioethics that focuses on controversial issues in healthcare, including:

- Clinical trials
- **Clinical research**
- Public health

The 4 Principles of Ethics

1. Respect for autonomy
- 2. Beneficence**
3. Nonmaleficence
- 4. Justice**

Respect for Autonomy

Patients have the right to **make their own decisions** and have their choices be respected.

Beneficence

Beneficence is “the duty to try to bring about benefit to the patient.”

The ethical principle of beneficence is the obligation of a healthcare professional to act for the benefit of the patient.

Nonmaleficence

The principle of nonmaleficence is “the duty to **prevent** harm.”

It is closely associated with the Hippocrates saying “*primum non nocere*,” or “**first, do no harm.**”

Justice

The principle of justice defines **fairness** and **equity** in treatment.

In addition to the patient being treated fairly, the healthcare organization and healthcare professional must also be treated **fairly**.

The Impact of Virtue Ethics in Healthcare

Virtue is defined as **"behavior showing high moral standards."**

A virtuous healthcare professional has a strong moral compass, meaning they can judge what is right from wrong and act accordingly.

In virtue ethics, the healthcare professional is concerned with the **whole** of a patient's life, rather than a **particular** episode or action.

The Impact of Religion in Healthcare

The greatest impact religion has in healthcare is due to patient's **religious beliefs and their outcomes.**

Healthcare professionals must realize how these beliefs can impact their patient's outcome:

- Medical decisions
- **Gender preference** of the healthcare provider
- Diet
- **Medicines**
- Strict prayer times

Situational Ethics

Situational ethics, also called **contextualism**, follows the belief that right and wrong depend upon the situation.

Situational ethics teaches that healthcare professionals ethical decisions should follow **flexible guidelines** on a case-by-case basis since every patient's situation is unique.

Lesson Six – Ethical Foundations

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on ethical foundations. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Ethical Foundations Post-Test*
- *Ethical Foundations Post-Test – Answer Key*

Facilitation Steps:

1. Give participants the following challenge: Write down ten virtues that are important to you and which guide your moral compass. How do you believe this list could impact your decision-making as a healthcare professional?
2. Have participants complete the student workbook pages: *Situational Ethics* and *Ethics and Religion*.
3. Instruct participants to take a few minutes to complete the post-test.
4. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Ethical Foundations Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as a religious impact on healthcare?
 - a. Language barrier
 - b. Medicines
 - c. Strict prayer time
 - d. Diet
2. What is meant by a healthcare professional having a strong moral compass?
 - a. They do not condone colleagues' bad behavior
 - b. They take into consideration a patient's religious beliefs
 - c. They will act the same in every situation
 - d. They can judge right from wrong and act accordingly
3. Which is the definition of beneficence?
 - a. The duty to prevent harm
 - b. The duty to try to bring about benefit to the patient
 - c. The respect for autonomy
 - d. The administration of justice
4. Which of these is **not** one of the four principles of ethics?
 - a. Beneficence
 - b. Respect for justice
 - c. Justice
 - d. Religious freedom
5. Which is the principle of nonmaleficence?
 - a. The duty to respond
 - b. The duty to provide a benefit to the patient
 - c. The duty to prevent harm
 - d. The duty to provide comfort

Ethical Foundations Post-Test – Answer Key

1. Which of these is **not** mentioned as a religious impact on healthcare?
 - a. **Language barrier**
 - b. Medicines
 - c. Strict prayer time
 - d. Diet
2. What is meant by a healthcare professional having a strong moral compass?
 - a. They do not condone colleagues' bad behavior
 - b. They take into consideration a patient's religious beliefs
 - c. They will act the same in every situation
 - d. **They can judge right from wrong and act accordingly**
3. Which is the definition of beneficence?
 - a. The duty to prevent harm
 - b. **The duty to try to bring about benefit to the patient**
 - c. The respect for autonomy
 - d. The administration of justice
4. Which of these is **not** one of the four principles of ethics?
 - a. Beneficence
 - b. Respect for justice
 - c. Justice
 - d. **Religious freedom**
5. Which is the principle of nonmaleficence?
 - a. The duty to respond
 - b. The duty to provide a benefit to the patient
 - c. **The duty to prevent harm**
 - d. The duty to provide comfort

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Lesson Seven – Ethical vs. Legal Issues Impacting Healthcare

Lesson Overview

In this lesson, participants will learn to differentiate between ethical and legal issues and their impact on healthcare. Participants will learn about some common ethical issues and their implications in a healthcare setting. Additionally, participants will learn about healthcare ethics committees and the definition of scope of practice.

Lesson Objectives

After completing this lesson, participants will be able to:

- Differentiate between ethical and legal issues impacting healthcare
- Identify ethical issues and their implications related to healthcare
- Explain the role of an ethics committee
- Define scope of practice

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) worksheet</i> • <i>Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) Instructor Resource</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Pre-Test</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Pre-Test – Answer Key</i>	1. Print/photocopy <i>Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) worksheet</i> (one per participant) 2. Print/photocopy <i>Ethical vs. Legal Issues Impacting Healthcare Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Ethical vs. Legal Issues Impacting Healthcare slide presentation</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Presentation Guide</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Presentation Guide – Answer Key</i>	1. Prepare <i>Ethical vs. Legal Issues Impacting Healthcare</i> slide presentation for viewing 2. Print/photocopy <i>Ethical vs. Legal Issues Impacting Healthcare Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• <i>Ethical and Legal Issues in Healthcare Student Workbook</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Post-Test</i> • <i>Ethical vs. Legal Issues Impacting Healthcare Post-Test – Answer Key</i>	1. Print/photocopy <i>Ethical vs. Legal Issues Impacting Healthcare Post-Test</i> (one per participant)	20 minutes

Lesson Seven – Ethical vs. Legal Issues Impacting Healthcare

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) worksheet*
- *Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) Instructor Resource*
- *Ethical vs. Legal Issues Impacting Healthcare Pre-Test*
- *Ethical vs. Legal Issues Impacting Healthcare Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) Instructor Resource* page available.
3. Distribute two copies of the *Ethical vs. Legal Issues Impacting Healthcare Pre-Test*.
4. Have the *Ethical vs. Legal Issues Impacting Healthcare Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Sammy is a single mom who works as a registered nurse in the emergency department. She has two young children who her sister watches when she is working. Sammy's ex-husband left her three years ago after she had their second baby and no one has heard from him since. Sammy often talks with her coworkers about how she would like to meet a nice man, but it is impossible since she cannot date her colleagues or patients. And with two young children and her work schedule, she never has time to go out.

One busy evening, an ambulance delivers a male patient named Rob, who was involved in a work-related accident when he fell off a roof. Rob has a fractured femur, a broken arm, and a dislocated shoulder. While Sammy is tending to her patient, she feels a strong attraction to Rob and daydreams how nice it would be to go on a date with him. Rob is not wearing a wedding ring, but Sammy knows that not all married men do, especially those who work construction. Sammy casually asks Rob if he wants her to call his wife or girlfriend, and Rob replies with a big smile that he is single and available if she's interested. Rob asks Sammy if he can have her number because he wants to take her on a date after getting back on his feet. Sammy explains that she cannot date her patients, and Rob says he won't tell anyone if she won't. He also adds that once he leaves the hospital, he is not her patient anymore.

REFLECT on the situation:

What emotions do you think Sammy feels when Rob asks her out on a date?

I think Sammy would have mixed emotions. I believe she would be excited that Rob asked her out on a date since there was a mutual attraction, but I think she would feel conflicted because her profession states that she cannot date patients.

Do you think it is unfair for Rob to press Sammy about not dating her patients?

I think anyone that is interested in taking someone on a date would be persistent. I do not believe it is necessarily unfair, and Rob has a good point that he is no longer her patient when he leaves the hospital.

Do you believe all healthcare professionals should not be able to date their patients?

I think there should be well-defined policies on healthcare professionals dating their patients. For example, ethically, a physician should not date a current patient because the physician/patient boundaries are blurred. I think the same goes for nurses or any other healthcare professional. Once a person is no longer a patient, I believe policies should state when and if it would be appropriate to date them.

SHARE your thoughts with a peer when it's discussion time.

Ethical vs. Legal Issues Impacting Healthcare (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Sammy is a single mom who works as a registered nurse in the emergency department. She has two young children who her sister watches when she is working. Sammy's ex-husband left her three years ago after she had their second baby and no one has heard from him since. Sammy often talks with her coworkers about how she would like to meet a nice man, but it is impossible since she cannot date her colleagues or patients. And with two young children and her work schedule, she never has time to go out.

One busy evening, an ambulance delivers a male patient named Rob, who was involved in a work-related accident when he fell off a roof. Rob has a fractured femur, a broken arm, and a dislocated shoulder. While Sammy is tending to her patient, she feels a strong attraction to Rob and daydreams how nice it would be to go on a date with him. Rob is not wearing a wedding ring, but Sammy knows that not all married men do, especially those who work construction. Sammy casually asks Rob if he wants her to call his wife or girlfriend, and Rob replies with a big smile that he is single and available if she's interested. Rob asks Sammy if he can have her number because he wants to take her on a date after getting back on his feet. Sammy explains that she cannot date her patients, and Rob says he won't tell anyone if she won't. He also adds that once he leaves the hospital, he is not her patient anymore.

REFLECT on the situation:

What emotions do you think Sammy feels when Rob asks her out on a date?

Do you think it is unfair for Rob to press Sammy about not dating her patients?

Do you believe all healthcare professionals should not be able to date their patients?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Ethical vs. Legal Issues Impacting Healthcare Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as a contributor to economic inequality?
 - a. Language barrier
 - b. Ethnicity
 - c. Wealth
 - d. Income
2. When considering end-of-life issues, who decides what is best for the patient?
 - a. The court system
 - b. The family
 - c. The healthcare provider
 - d. The patient
3. Which organization says that building relationships of trust with patients is fundamental to the ethical practice of medicine?
 - a. The American Ethics Association
 - b. The American Heart Association
 - c. The American Medical Association
 - d. The American Physician's Association
4. Which of these is **not** one of the ethical issues regarding disease prevention?
 - a. Cultural beliefs
 - b. Conflicting values
 - c. Economic equality
 - d. Religious practices
5. What is the primary legal issue regarding patient privacy and confidentiality?
 - a. HIPAA compliance
 - b. Slander
 - c. Defamation of character
 - d. Libel

Ethical vs. Legal Issues Impacting Healthcare Pre-Test – Answer Key

1. Which of these is **not** mentioned as a contributor to economic inequality?
 - a. **Language barrier**
 - b. Ethnicity
 - c. Wealth
 - d. Income
2. When considering end-of-life issues, who decides what is best for the patient?
 - a. The court system
 - b. The family
 - c. The healthcare provider
 - d. **The patient**
3. Which organization says that building relationships of trust with patients is fundamental to the ethical practice of medicine?
 - a. The American Ethics Association
 - b. The American Heart Association
 - c. **The American Medical Association**
 - d. The American Physician's Association
4. Which of these is **not** one of the ethical issues regarding disease prevention?
 - a. Cultural beliefs
 - b. Conflicting values
 - c. **Economic equality**
 - d. Religious practices
5. What is the primary legal issue regarding patient privacy and confidentiality?
 - a. **HIPAA compliance**
 - b. Slander
 - c. Defamation of character
 - d. Libel

Lesson Seven – Ethical vs. Legal Issues Impacting Healthcare

LEARN: Ethical vs. Legal Issues Impacting Healthcare Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to ethical vs. legal issues impacting healthcare. Participants will learn about ethical issues and their implications, the role of an ethics committee, and the definition of scope of practice.

Materials:

- *Ethical vs. Legal Issues Impacting Healthcare* slide presentation
- *Ethical vs. Legal Issues Impacting Healthcare Presentation Guide*
- *Ethical vs. Legal Issues Impacting Healthcare Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Ethical vs. Legal Issues Impacting Healthcare Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 7: Ethical vs. Legal Issues Impacting Healthcare.

Slide 2: The goals and objectives of this lesson are:

- Differentiate between ethical and legal issues impacting healthcare
- Identify ethical issues and their implications related to healthcare
- Explain the role of an ethics committee
- Define scope of practice

Slide 3: Healthcare professionals are governed by rules and regulations and ethical and legal standards. Ethical standards are based on the human principle of right and wrong, or the moral compass you learned about in the previous lesson. Ethical standards do not have a legal

basis like legal standards do. However, most facilities that employ healthcare professionals have an ethical code of conduct for employees to follow. They also have ethics committees that educate and inform healthcare professionals on the most appropriate way to act in certain ethical situations. Some ethical issues impacting healthcare can also be a legal issue, such as patient privacy and confidentiality. Other examples of ethical issues that affect healthcare are:

- Disease prevention
- Relationships
- End-of-life issues
- Economic inequality

We will cover these issues in greater depth in the following slides.

The legal issues impacting healthcare were covered in previous lessons, including medical malpractice, HIPAA compliance, and informed consent.

Slide 4: Patient privacy and confidentiality falls under both legal and ethical issues. The primary legal issue concerns HIPAA compliance. Ethically, withholding information about a patient's condition could potentially harm someone else. For example, if a patient is diagnosed with HIV, the healthcare provider must report the disease to public health authorities following HIPAA guidelines. However, some healthcare professionals conflict with their ethical obligations and any oath they have taken, which prohibits disclosing personal health information. The healthcare professional also risks the patient losing trust in them. In the future, the patient may withhold crucial medical information that can be used in their assessment and treatment, which could cause harm to the patient.

Slide 5: Ethical issues surrounding disease prevention involves the safety of public health. While the health department's policies and practices aim to control and prevent the spread of disease through vaccinations and treatment, community members have the right to choose what is best for them. Individuals may have conflicting beliefs and values regarding vaccinations, which could be a personal or religious belief. People have the right to choose whether they want treatment for a contagious disease, and if they do not choose to be treated, they put the rest of the community at risk. While every person has the right to choose, ethically, it impacts healthcare by placing a physical and financial strain on the system when many people become infected. Some say it is the same with vaccinations. While many people promote vaccinations to provide immunity to a disease, many others do not believe in vaccinations for many reasons.

Have participants pair up and discuss the following: should we allow volunteers to expose themselves to an illness to speed up the development of a vaccine? Decide if you agree or disagree with the statement and why.

Slide 6: Intimate relationships between medical professionals and their patients are strictly prohibited. The American Medical Association says that building relationships of trust with patients is fundamental to ethical practice in medicine, and the patient's welfare is put above the healthcare professional's self-interest and desires. Since there are many types of healthcare professionals, there are many types of codes of conduct. However, ethically, most codes of conduct strictly prohibit intimate relationships with patients, which could be construed as "sexual misconduct." In addition to relationships with patients, many agencies that employ healthcare professionals have rules about not having relationships with colleagues, as they deem it unprofessional. Every industry and agency has policies and procedures, and it is the healthcare professional's responsibility to know the rules and laws that govern them.

Slide 7: Patients have the right to make their own decisions regarding their end-of-life and have their choices be respected. However,

family members may struggle with the patient's decision, and the medical professional must honor the patient's wishes. For end-of-life issues, it is recommended to have the family involved from the start, if the patient allows. The healthcare professional can take the time to explain what will happen when the patient passes and what their wishes are. It won't be easier for the family when that happens, but when the family is prepared, it takes some of the ethical burdens off of the healthcare professional. The decision is what the patient made, not the healthcare provider.

The impact end-of-life issues have on healthcare is that not all family members honor the patient's wishes. For example, say a patient has a Do Not Resuscitate order and a family member has a copy. The patient has a cardiac arrest and becomes unconscious. The family member does not want the patient to die, so they call 911. When the emergency medical responders arrive, the family withholds the DNR order, and the emergency responders start CPR and transport the patient to the hospital. The emergency department staff takes over and does not realize the patient has a DNR until the patient's physician is contacted. Those resources did not need to be utilized if the family would have honored the patient's wishes.

Conduct a class discussion on the following scenario. A patient comes into the ER with "DO NOT RESUSCITATE" tattooed across his/her chest and they lose their pulse. What would you do? What legal and ethical issues does this raise?

Slide 8: Economic inequality refers to the disparities in wealth and income among a society. These economic inequalities lead to poverty, depriving individuals to access goods and services considered necessary to an acceptable standard of living. Many factors contribute to economic inequality, including:

- Income: what a person makes and if it is sufficient to provide a decent standard of living
- Wealth: how much a person has in possessions or money
- Disability: people with disabilities often find themselves economically unequal due to

loss of income and high medical bills, resulting in their loss of wealth

- Ethnicity: some ethnic groups have a lower socioeconomic status, leading them to economic and health inequalities

The ethical issues and the impact economic inequality has on healthcare varies by geographic location. Healthcare providers want to do the “best amount of good for the most amount of people,” but organizations also need to make money. If a patient is in a lower socioeconomic status, they often don’t have the resources to provide the best medical services they need. Healthcare professionals are morally distressed; they can only offer a basic service with minimal benefit due to a lack of funding. Wealthier individuals are provided more preventative and healthcare treatment options, with the chance of a longer lifespan.

Slide 9: An ethics committee is a group of people whose job is to protect patients' interests and address moral issues. The committee typically has a board member of the facility, a layperson, and an administrator. Depending on the size of the organization, ethics committees can be larger than three people. Some committees include members of the clergy, or an ethicist, if available. In healthcare, an ethics committee serves three purposes:

1. Consultation resource: to help patients, patients’ family members, and healthcare professionals identify, analyze, and resolve ethically complex healthcare issues.
2. Provide education: the committee provides ongoing ethics education to healthcare professionals and more specialized ethics training to the committee.
3. Create and review policies: most ethics committees are involved in creating policies for the organization or agency and review current policies as needed to maintain and improve the ethical treatment of patients. The goal in staying current with ethical issues in healthcare and providing continuing education is to reduce the need for ethical consultations, conflict resolution, and to decrease the potential for lawsuits against the organization.

Slide 10: Scope of practice describes “the services and procedures a healthcare professional is deemed competent to perform, and permitted to undertake, in keeping with the terms of their professional license.” Every state has laws, regulations, and licensing bodies that describe the educational and training requirements and defines the scope of practice for every type of healthcare professional. For example, a nursing scope of practice will be different from a physician’s scope of practice. Every scope of practice explains what skills, treatments, and procedures can legally be done based on their education and training. A nurse might be allowed to start intravenous lines and give medications based on a physician’s orders, but their scope of practice may not allow them to perform surgical procedures.

2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Ethical vs. Legal Issues Impacting Healthcare Presentation Guide

Complete the following information as you listen to the Ethical vs. Legal Issues Impacting Healthcare presentation.

Ethical standards: based on the human principle of _____ and _____, without a legal basis. For example:

- Patient privacy and confidentiality
- Disease prevention
- _____
- End-of-life issues
- _____

Legal standards: set by _____, including:

- _____
- HIPAA compliance
- _____
- Ethical issues related to healthcare: patient privacy

Patient Privacy

Patient privacy and confidentiality falls under both _____ and _____ issues.

Ethically, withholding information about a patient's condition could potentially _____ someone else.

Disease Prevention

The ethical issues regarding disease prevention includes:

- _____
- Conflicting values
- _____

Relationships

Intimate relationships between _____ and their patients is strictly _____.

End-of-Life Issues

_____ have the right to make their own decisions regarding their end-of-life and have their choices be respected.

However, _____ may struggle with the patient's decision, and the medical professional must ethically _____ the patient's wishes.

Economic Inequality

There are many factors that contribute to economic inequality, including:

- _____
- Wealth
- _____
- Ethnicity

Ethics Committee

An ethics committee is a group of people whose job is to _____ of patients and address moral issues.

The committee normally has a board member of the _____, a layperson, and an _____.

In healthcare, an ethics committee serves three purposes:

1. Consultation resource
2. Provide _____
3. Create and review _____

Scope of Practice

Scope of practice describes "the _____ and _____ a healthcare professional is deemed competent to _____, and permitted to _____, in keeping with the terms of their professional license."

Ethical vs. Legal Issues Impacting Healthcare

Presentation Guide – Answer Key

Ethical standards: based on the human principle of **right** and **wrong** without a legal basis. For example:

- Patient privacy and confidentiality
- Disease prevention
- **Relationships**
- End-of-life issues
- **Economic inequality**

Legal standards: set by **government laws**, including:

- **Medical malpractice**
- HIPAA compliance
- **Informed consent**
- Ethical issues related to healthcare: patient privacy

Patient Privacy

Patient privacy and confidentiality falls under both **legal** and **ethical** issues.

Ethically, withholding information about a patient's condition could potentially **harm** someone else.

Disease Prevention

The ethical issues regarding disease prevention includes:

- **Cultural beliefs**
- Conflicting values
- **Religious practices**

Relationships

Intimate relationships between **medical professionals** and their patients is strictly **prohibited**.

End-of-Life Issues

Patients have the right to make their own decisions regarding their end-of-life and have their choices be respected.

However, **family members** may struggle with the patient's decision, and the medical professional must ethically **honor** the patient's wishes.

Economic Inequality

There are many factors that contribute to economic inequality, including:

- **Income**
- Wealth
- **Disability**
- Ethnicity

Ethics Committee

An ethics committee is a group of people whose job is to **protect the interests** of patients and address moral issues.

The committee normally has a board member of the **facility**, a layperson, and an **administrator**.

In healthcare, an ethics committee serves three purposes:

1. Consultation resource
2. Provide **education**
3. Create and review **policies**

Scope of Practice

Scope of practice describes “the **services** and **procedures** a healthcare professional is deemed competent to **perform**, and permitted to **undertake**, in keeping with the terms of their professional license.”

Lesson Seven – Ethical vs. Legal Issues Impacting Healthcare

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on ethical and legal issues impacting healthcare. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Ethical vs. Legal Issues Impacting Healthcare Post-Test*
- *Ethical vs. Legal Issues Impacting Healthcare Post-Test – Answer Key*

Facilitation Steps:

1. Have participants complete the student workbook pages: *Difficult Ethical Issues Self-Study* and *Ethics Committee Investigation*.
2. Instruct participants to take a few minutes to complete the post-test.
3. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.

2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Ethical vs. Legal Issues Impacting Healthcare

Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as a contributor to economic inequality?
 - a. Language barrier
 - b. Ethnicity
 - c. Wealth
 - d. Income
2. When considering end-of-life issues, who decides what is best for the patient?
 - a. The court system
 - b. The family
 - c. The healthcare provider
 - d. The patient
3. Which organization says that building relationships of trust with patients is fundamental to the ethical practice of medicine?
 - a. The American Ethics Association
 - b. The American Heart Association
 - c. The American Medical Association
 - d. The American Physician's Association
4. Which of these is **not** one of the ethical issues regarding disease prevention?
 - a. Cultural beliefs
 - b. Conflicting values
 - c. Economic equality
 - d. Religious practices
5. What is the primary legal issue regarding patient privacy and confidentiality?
 - a. HIPAA compliance
 - b. Slander
 - c. Defamation of character
 - d. Libel

Ethical vs. Legal Issues Impacting Healthcare Post-Test – Answer Key

1. Which of these is **not** mentioned as a contributor to economic inequality?
 - a. **Language barrier**
 - b. Ethnicity
 - c. Wealth
 - d. Income
2. When considering end-of-life issues, who decides what is best for the patient?
 - a. The court system
 - b. The family
 - c. The healthcare provider
 - d. **The patient**
3. Which organization says that building relationships of trust with patients is fundamental to the ethical practice of medicine?
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4. Which of these is **not** one of the ethical issues regarding disease prevention?
 - a. Cultural beliefs
 - b. Conflicting values
 - c. **Economic equality**
 - d. Religious practices
5. What is the primary legal issue regarding patient privacy and confidentiality?
 - a. **HIPAA compliance**
 - b. Slander
 - c. Defamation of character
 - d. Libel

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Lesson Eight – Contemporary Ethical Dilemmas and Their Implications

Lesson Overview

In this lesson, participants will learn about contemporary ethical dilemmas and their implications. Participants will learn about reproductive issues, organ donation, clinical trials, and genetic testing.

Lesson Objectives

After completing this lesson, participants will be able to:

- Examine reproductive issues (abortion, in vitro, surrogacy, etc.)
- Define organ donation
- Explain clinical trials and research
- Define genetic testing

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy)</i> worksheet • <i>Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy) Instructor Resource</i> • <i>Contemporary Ethical Dilemmas and Their Implications Pre-Test</i> • <i>Contemporary Ethical Dilemmas and Their Implications Pre-Test – Answer Key</i>	1. Print/photocopy <i>Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy)</i> worksheet (one per participant) 2. Print/photocopy <i>Contemporary Ethical Dilemmas and Their Implications Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Contemporary Ethical Dilemmas and Their Implications</i> slide presentation • <i>Contemporary Ethical Dilemmas and Their Implications Presentation Guide</i> • <i>Contemporary Ethical Dilemmas and Their Implications Presentation Guide – Answer Key</i>	1. Prepare <i>Contemporary Ethical Dilemmas and Their Implications</i> slide presentation for viewing 2. Print/photocopy <i>Contemporary Ethical Dilemmas and Their Implications Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• Ethical and Legal Issues in Healthcare Student Workbook • <i>Contemporary Ethical Dilemmas and Their Implications Post-Test</i> • <i>Contemporary Ethical Dilemmas and Their Implications Post-Test – Answer Key</i>	1. Print/photocopy <i>Contemporary Ethical Dilemmas and Their Implications Post-Test</i> (one per participant)	20 minutes

Lesson Eight – Contemporary Ethical Dilemmas and Their Implications

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy)* worksheet
- *Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy) Instructor Resource*
- *Contemporary Ethical Dilemmas and Their Implications Pre-Test*
- *Contemporary Ethical Dilemmas and Their Implications Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy)* worksheets prior to or at the beginning of class.
2. Have the *Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy) Instructor Resource* page available.
3. Distribute the *Contemporary Ethical Dilemmas and Their Implications Pre-Test*.
4. Have the *Contemporary Ethical Dilemmas and Their Implications Pre-Test – Answer Key* available. The answers will be given after the post-test is given since the tests are the same.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Melissa is working as an ultrasound technician at an OB/GYN clinic and has a new patient named Candy, who is six months pregnant and in for an ultrasound. Candy is with a couple who asks if they can be there for the procedure so they can see the images of their baby. Candy explains that she is a surrogate mother for the couple, and she would like them to join her in the exam room. Melissa has applied the gel and is using the ultrasound machine when the picture of the baby pops up on the screen. Candy and the couple burst into tears, which Melissa thinks are tears of joy. However, Candy is sobbing uncontrollably and asks for the couple to leave the room. After the couple leaves, Candy tells Melissa that she did not think being a surrogate mother would be so hard. Candy explains that she has been feeling the baby kick, and after seeing the screen, she does not believe she will be able to give the baby to the couple. She is torn and tells Melissa she does not know what to do.

REFLECT on the situation:

What emotions do you think Candy feels when seeing the baby's picture on the screen?

I think Candy would be feeling a mixture of emotions. I think she would feel joy upon seeing the baby and sadness when she realizes that she is a surrogate and will have to give the baby to the couple when it is born. I'm sure she would be feeling uncertainty and confusion, too.

Do you think it would be difficult for surrogate mothers not to get attached to the baby?

I think surrogate mothers would have to have the mindset from the beginning that this is not their baby, and they cannot get attached. I still believe it would be difficult not to get attached when you start feeling the baby move and kick around.

What emotions do you think Melissa would be feeling?

I think Melissa would feel empathetic and understanding of Candy's feelings. Melissa has probably seen this happen before and realizes it must be hard for Candy.

SHARE your thoughts with a peer when it's discussion time.

Contemporary Ethical Dilemmas and Their Implications (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Melissa is working as an ultrasound technician at an OB/GYN clinic and has a new patient named Candy, who is six months pregnant and in for an ultrasound. Candy is with a couple who asks if they can be there for the procedure so they can see the images of their baby. Candy explains that she is a surrogate mother for the couple, and she would like them to join her in the exam room. Melissa has applied the gel and is using the ultrasound machine when the picture of the baby pops up on the screen. Candy and the couple burst into tears, which Melissa thinks are tears of joy. However, Candy is sobbing uncontrollably and asks for the couple to leave the room. After the couple leaves, Candy tells Melissa that she did not think being a surrogate mother would be so hard. Candy explains that she has been feeling the baby kick, and after seeing the screen, she does not believe she will be able to give the baby to the couple. She is torn and tells Melissa she does not know what to do.

REFLECT on the situation:

What emotions do you think Candy feels when seeing the baby's picture on the screen?

Do you think it would be difficult for surrogate mothers not to get attached to the baby?

What emotions do you think Melissa would be feeling?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Contemporary Ethical Dilemmas and Their Implications Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as one of the reproductive issues?
 - a. In vitro
 - b. Wrongful death
 - c. Surrogacy
 - d. Sterilization
2. When considering female sterilization, who gives consent for this procedure?
 - a. The physician
 - b. The family
 - c. The significant other
 - d. The patient
3. Regarding clinical trials, which of the following is studied?
 - a. Primates
 - b. Humans
 - c. Lab mice
 - d. Pig fetuses
4. Which of these is **not** examined for changes in genetic testing?
 - a. Stem cells
 - b. Chromosomes
 - c. Proteins
 - d. Genes
5. Why, in some cases, are several fertilized eggs inserted into the womb during in vitro fertilization??
 - a. To reduce the number of discarded eggs
 - b. To save money
 - c. To increase the likelihood of conception
 - d. To decrease the chance of miscarriage

Contemporary Ethical Dilemmas and Their Implications Pre-Test – Answer Key

1. Which of these is **not** mentioned as one of the reproductive issues?
 - a. In vitro
 - b. Wrongful death**
 - c. Surrogacy
 - d. Sterilization
2. When considering female sterilization, who gives consent for this procedure?
 - a. The physician
 - b. The family
 - c. The significant other
 - d. The patient**
3. Regarding clinical trials, which of the following is studied?
 - a. Primates
 - b. Humans**
 - c. Lab mice
 - d. Pig fetuses
4. Which of these is **not** examined for changes in genetic testing?
 - a. Stem cells**
 - b. Chromosomes
 - c. Proteins
 - d. Genes
5. Why, in some cases, are several fertilized eggs inserted into the womb during in vitro fertilization??
 - a. To reduce the number of discarded eggs
 - b. To save money
 - c. To increase the likelihood of conception**
 - d. To decrease the chance of miscarriage

Lesson Eight – Contemporary Ethical Dilemmas and Their Implications

LEARN: Contemporary Ethical Dilemmas and Their Implications Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to contemporary ethical dilemmas and their implications. Participants will learn about reproductive issues, organ donation, clinical trials and research, and genetic testing.

Materials:

- *Contemporary Ethical Dilemmas and Their Implications* slide presentation
- *Contemporary Ethical Dilemmas and Their Implications Presentation Guide*
- *Contemporary Ethical Dilemmas and Their Implications Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Contemporary Ethical Dilemmas and Their Implications Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 8: Contemporary Ethical Dilemmas and Their Implications.

Slide 2: The goals and objectives of this lesson are:

- Examine reproductive issues (abortion, in vitro, surrogacy, etc.)
- Define organ donation
- Explain clinical trials and research
- Define genetic testing

Slide 3: There are many ethical aspects regarding reproductive issues. The topics covered in this lesson are:

- Abortion

- In vitro fertilization
- Surrogacy
- Wrongful birth
- Sterilization

Slide 4: An abortion is “a procedure to end a pregnancy. It uses medicine or surgery to remove the embryo or fetus and placenta from the uterus. The procedure is done by a licensed healthcare professional.”

Abortion was legalized in 1973 and remains a controversial topic to this day. There are differing opinions that the embryo and fetus are human beings with the same fundamental rights as others. Others believe that a fetus has no rights while in the womb.

Ethical dilemmas include:

- A woman’s right to autonomy: pregnant women should have the right to decide what they do with their bodies, and physicians should respect their decision
- The fetus’s right to life: some people believe that the fetus has the right to life regardless of the mother’s wishes
- The moral status of the embryo and fetus: opinions range from the belief that an embryo is a human being from conception, while others believe that a fetus at a certain stage becomes human beings
- Birth defects: the ethical dilemma regarding birth defects is some people believe abortion should only be used if the fetus has a severe congenital disability; others believe abortion should never be used, even when there are birth defects

Slide 5: In vitro fertilization (IVF) is a medical procedure where an egg is fertilized by sperm in a test tube or elsewhere outside the body. The ethical dilemmas and implications are:

- Embryo donation and freezing: some couples choose to use eggs from a donor. The implication being that a contract needs to be drawn up that defines the rights and responsibilities of all parties involved. The freezing of embryos raises the moral and ethical dilemmas for those that believe that life is created at conception and that each frozen embryo represents a life. If unused, the frozen embryos are a life unfilled.
- “Unnatural” procedure: certain religions believe that in vitro fertilization is an unnatural procedure and that women should only become pregnant by traditional methods.
- Restrictions on access to IVF: in vitro fertilization is costly and many people cannot afford it. The ethical dilemma is how to provide equitable distribution to those with economic barriers. As it is now, preferential treatment is given to those who are financially stable.
- Multiple pregnancies: in some cases, several fertilized eggs are inserted into the womb to increase the likelihood of conception. This practice increases the chance of multiple fetuses developing. There is a high risk of low birth weight, infant health issues, and premature birth when there are multiple fetuses. There is also a higher risk of the mother developing pregnancy-induced issues such as gestational diabetes and hypertension (high blood pressure).
- Costly

Slide 6: Surrogacy is when a woman acts as a surrogate mother for someone who cannot have children. The surrogate mother becomes pregnant, gives birth, then gives the baby to the other person. Some ethical dilemmas surrounding surrogacy:

- Commercial transaction: since money is paid to the surrogate, there are moral and ethical dilemmas with turning a woman’s normal biological function into a commercial transaction.
- Validity of consent: when a woman is hired as a surrogate, a legal contract needs to be made so both parties understand the rights and responsibilities to the future child and all parties involved.

- Exploitation of women: some believe that surrogacy exploits women with lower incomes who are desperate for money and will do whatever is necessary to make money. This is one of the same arguments for women who sell their eggs for in vitro fertilization.

Slide 7: Due to genetic and prenatal testing, medical professionals can determine if there is a serious condition with the fetus while in the womb. If a condition is identified, the parents have the option to terminate the pregnancy. If a medical professional fails to properly diagnose or does not offer genetic testing and a child is born with birth defects, the parents can pursue a wrongful birth lawsuit. The ethical issues involved in a wrongful birth include the suffering and hardship that the child will entail as a disabled person and the option to terminate the pregnancy. It is a moral issue for many parents because they may not believe in abortion or feel that having a disabled child is better than having no child at all.

Pose the following scenario to the class for a group discussion.

You Be the Judge

Decide how you believe the court should rule on this case.

Scenario: A woman received prenatal care at a military hospital and subsequently gave birth to a severely handicapped child. She brought suit against the federal government alleging that her physicians were negligent in failing to diagnose severe defects in her unborn child and thus deprived her of the opportunity to terminate the pregnancy that resulted in the birth of a severely handicapped child.

Slide 8: Sterilization is a surgery that is performed on men and women so they cannot produce children. Sterilization is a common method of birth control, with more women than men choosing to be sterilized. Here are some ethical concerns regarding sterilization:

- Consent: a concern with this form of contraception is that only the patient is required to give consent for the surgery, i.e., the spouse or significant other has no voice in the matter

- Other types of contraception: information should be provided to the patient regarding other types of long-acting contraception that is available, including the failure rate. Often, a patient's race, socioeconomic class, or ethnicity can influence a healthcare professional's contraceptive recommendations.
- Counseling: women under 30 years or who have never had children should be counseled so there will not be regret later, and notified that there is now a wider range of reversible sterilization alternatives that are equally effective.
- Duress: any decisions about sterilization should not be made under duress or after losing a relationship or child. Many women do not understand the permanence of sterilization and need to be educated by their healthcare practitioner.

Slide 9: Organ donation is “the process when a person allows an organ of their own to be removed and transplanted into another person, legally, either by consent while the donor is alive or dead.” Some ethical issues surrounding organ donation include:

- Commodity: a question that is asked is whether the human body is a commodity. There is an organ market where people will purchase and sell organs. This taps into the ethical dilemma of how lower-income citizens cannot afford to buy a much-needed organ for their survival, or will sell an organ to improve their finances.
- Recipient: there are many ethical questions when it comes to who receives an organ. How is the recipient chosen? Should several people receive one organ or one person receives several organs? Should a person who drinks, smokes, or use illicit drugs be an organ recipient? These are all valid questions with lots of debate.
- Screening: when organs are sold on the market, there is an imperfect screening process that compromises the organ's quality and the health of both the donor and the recipient. If not appropriately screened, the organ could be a transmitter of disease.

Divide the class into small groups. Have each group debate one of the following questions:

#1: Should several people receive one organ each from a donor or should one person receive several organs? How would you make the decision?

#2: Should a person who drinks, smokes, or uses illicit drugs be an organ recipient? What about someone who is morbidly obese?

Slide 10: Clinical research is the study of health and illness to learn how to diagnose, treat, and prevent illness. **Clinical trials** are a clinical research study on human participants, which is an experiment to answer questions about new treatments or medications. Participants in clinical trials are informed of the risks involved with such a trial and sign an informed consent form before participating. Ethical issues in clinical trials include:

- Protection of rights: in addition to having a signed consent form, researchers need to protect the participants' privacy and follow approved protocols.
- Safety: the clinical trial participants must have trust in the researchers to safely monitor the integrity of the research. If an unsafe or harmful part of the research is discovered, steps must be in place to contain the harm or stop the study if needed.
- Well-being: many who are opposed to clinical trials suggest that participants are being used as “human guinea pigs” or “lab mice.” Clinical trials are categorized as “low risk” or “high risk.” The concept of risk refers to the combination of the probability and the magnitude of some future harm to the participants. There have been noted changes to emotions and thought processes in those participating. Some of these undesirable changes can be transitory, recurrent, or permanent, but some research indicates a potential for causing serious psychological damage.

Slide 11: Genetic testing is a type of medical test which examines changes in genes, chromosomes, and proteins. The results are used to:

- Confirm or rule out a suspected condition: diagnostic testing identifies whether a

patient currently has a disease. Diagnostic testing is used to perform prenatal and newborn screenings, which is the most common type of genetic testing.

- Determine a person's chance of developing a condition: carrier testing determines if genetic traits are passed on, which can lead to a future disorder.

Ethical concerns are:

1. Confidentiality: since genetic testing provides an assessment of a person's risk for disease and disability, confidentiality is of the utmost concern. If private information is released, the patient can be denied insurance or employment based on their knowledge of a genetic predisposition, leading to discrimination. Another aspect of confidentiality involves family members. Patients who have genetic testing are under no obligation to inform family members of the results, which could interfere with their well-being. This confidentiality issue is a constant ethical and social challenge.
 2. Discrimination: in addition to being discriminated against by employers and insurance companies, knowledge of genetic risk can lead to community discrimination. Studies show that having knowledge of genetic risks also leads to psychological and social consequences.
 3. Cost: genetic testing is costly and is not always covered by insurance companies. The cost not only affects people in a lower income or socioeconomic bracket. The associated out-of-pocket expenses of genetic testing and counseling have produced a barrier, which does not discriminate based on race, ethnicity, or income.
2. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Contemporary Ethical Dilemmas and Their Implications Presentation Guide

Complete the following information as you listen to the Contemporary Ethical Dilemmas and Their Implications presentation.

Abortion

An abortion is _____.

It uses medicine or surgery to remove the embryo or fetus and placenta from the uterus. The procedure is done by a licensed healthcare professional.

Abortion was legalized in _____ and remains a controversial topic.

Ethical dilemmas include:

- A woman's right to autonomy
- The fetus's _____
- Moral status of the embryo and fetus
- _____

In Vitro Fertilization

In vitro fertilization (_____) is a medical procedure where

_____.

The ethical dilemmas and implications are:

- Embryo donation and _____
- "Unnatural" procedure
- Restrictions on _____ to IVF
- _____

Surrogacy

Surrogacy is when a woman acts as a surrogate mother for someone _____. The surrogate mother becomes pregnant, gives birth, then gives the baby to the other person.

Ethical and Legal Issues in Healthcare

Some ethical dilemmas surrounding surrogacy:

- Commercial transaction
- Validity of _____
- _____ of women

Wrongful Birth

Due to genetic and prenatal testing, medical professionals _____ determine if there is a serious condition with the fetus while in the womb. If a condition is identified, the parents have the _____ to terminate the pregnancy.

If a medical professional fails to properly diagnose or does not offer genetic testing and a child is born with birth defects, the parents can pursue a _____.

Sterilization

Sterilization is a surgery that is performed on men and women so _____.

Sterilization is a common method of _____, with more women than men choosing to be sterilized. Here are some ethical concerns regarding sterilization:

- _____
- Other types of contraception
- _____
- Duress

Organ Donation

Organ donation is “the process when a person allows an organ of their own to be removed and _____ into another person, legally, either by consent while the donor is alive or dead.”

Some ethical issues surrounding organ donation include:

1. Commodity
2. Recipient
3. _____

Clinical Trials and Research

Clinical research is the study of _____ and _____ to learn how to diagnose, treat, and prevent illness.

Ethical and Legal Issues in Healthcare

Clinical trials are a clinical _____, which is an experiment to answer questions about new treatments or medications.

Ethical issues include:

- Protection of _____
- _____
- Well-being

Genetic Testing

Genetic testing is a type of medical test which examines changes in _____, _____ and _____.

The results are used to:

- _____ or _____ a suspected condition
- Determine a person's chance of developing a condition

Ethical concerns are:

1. Confidentiality
2. Discrimination
3. _____

Contemporary Ethical Dilemmas and Their Implications Presentation Guide – Answer Key

Abortion

An abortion is **a procedure to end a pregnancy.**

It uses medicine or surgery to remove the embryo or fetus and placenta from the uterus. The procedure is done by a licensed healthcare professional.

Abortion was legalized in **1973** and remains a controversial topic.

Ethical dilemmas include:

- A woman's right to autonomy
- The fetus's **right to life**
- Moral status of the embryo and fetus
- **Birth defects**

In Vitro Fertilization

In vitro fertilization (**IVF**) is a medical procedure where **an egg is fertilized by sperm in a test tube or elsewhere outside the body.**

The ethical dilemmas and implications are:

- Embryo donation and freezing
- "Unnatural" procedure
- Restrictions on **access** to IVF
- **Multiple pregnancies**

Surrogacy

Surrogacy is when a woman acts as a surrogate mother for someone **who cannot have children.** The surrogate mother becomes pregnant, gives birth, then gives the baby to the other person.

Some ethical dilemmas surrounding surrogacy:

- Commercial transaction
- Validity of **consent**
- **Exploitation** of women

Wrongful Birth

Due to genetic and prenatal testing, medical professionals **can** determine if there is a serious condition with the fetus while in the womb. If a condition is identified, the parents have the **option** to terminate the pregnancy.

If a medical professional fails to properly diagnose or does not offer genetic testing and a child is born with birth defects, the parents can pursue a **wrongful birth lawsuit.**

Sterilization

Sterilization is a surgery that is performed on men and women so **they cannot produce children.**

Sterilization is a common method of **birth control**, with more women than men choosing to be sterilized. Here are some ethical concerns regarding sterilization:

- **Consent**
- Other types of contraception
- **Counselling**
- Duress

Organ Donation

Organ donation is “the process when a person allows an organ of their own to be removed and **transplanted** into another person, legally, either by consent while the donor is alive or dead.”

Some ethical issues surrounding organ donation include:

1. Commodity
2. Recipient
3. **Screening**

Clinical Trials and Research

Clinical research is the study of **health** and **illness** to learn how to diagnose, treat, and prevent illness.

Clinical trials are a clinical **research study on human participants**, which is an experiment to answer questions about new treatments or medications.

Ethical issues include:

- Protection of **rights**
- **Safety**
- Well-being

Genetic Testing

Genetic testing is a type of medical test which examines changes in **genes**, **chromosomes** and **protein**.

The results are used to:

- **Confirm** or **rule out** a suspected condition
- Determine a person’s chance of developing a condition

Ethical concerns are:

1. Confidentiality
2. Discrimination
3. **Cost**

Lesson Eight – Contemporary Ethical Dilemmas and Their Implications

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on contemporary ethical dilemmas and their implications. Once the activities are complete, a post-test will be given.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Ethical vs. Legal Issues Impacting Healthcare Post-Test*
- *Ethical vs. Legal Issues Impacting Healthcare Post-Test – Answer Key*

Facilitation Steps:

1. Have participants complete the student workbook pages: *Pro-Life and Pro-Choice* and *Wrongful Birth Case*.
2. Instruct participants to take a few minutes to complete the post-test.
3. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.

3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Contemporary Ethical Dilemmas and Their Implications Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as one of the reproductive issues?
 - a. In vitro
 - b. Wrongful death
 - c. Surrogacy
 - d. Sterilization
2. When considering female sterilization, who gives consent for this procedure?
 - a. The physician
 - b. The family
 - c. The significant other
 - d. The patient
3. Regarding clinical trials, which of the following is studied?
 - a. Primates
 - b. Humans
 - c. Lab mice
 - d. Pig fetuses
4. Which of these is **not** examined for changes in genetic testing?
 - a. Stem cells
 - b. Chromosomes
 - c. Proteins
 - d. Genes
5. Why, in some cases, are several fertilized eggs inserted into the womb during in vitro fertilization?
 - a. To reduce the number of discarded eggs
 - b. To save money
 - c. To increase the likelihood of conception
 - d. To decrease the chance of miscarriage

Contemporary Ethical Dilemmas and Their Implications Post-Test – Answer Key

1. Which of these is **not** mentioned as one of the reproductive issues?
 - a. In vitro
 - b. Wrongful death**
 - c. Surrogacy
 - d. Sterilization
2. When considering female sterilization, who gives consent for this procedure?
 - a. The physician
 - b. The family
 - c. The significant other
 - d. The patient**
3. Regarding clinical trials, which of the following is studied?
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5. Why, in some cases, are several fertilized eggs inserted into the womb during in vitro fertilization?
 - a. To reduce the number of discarded eggs
 - b. To save money
 - c. To increase the likelihood of conception**
 - d. To decrease the chance of miscarriage

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Lesson Nine – Religious/Cultural Values and Respect/Empathy for all Patients

Lesson Overview

In this lesson, participants will learn about religious and cultural values and their impact on healthcare. They will understand how to provide respect and empathy for all patients, learn about the laws governing different types of harassment, and how to file an incident report if harassment occurs.

Lesson Objectives

After completing this lesson, participants will be able to:

- Examine religious and cultural values as they impact healthcare
- Discuss how to ensure respectful and empathetic treatment of all patients
- Describe how to provide excellent customer service, civility, and patient satisfaction
- Identify the laws governing harassment and how to file an incident report

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) worksheet</i> • <i>Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) Instructor Resource</i> • <i>Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test</i> • <i>Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test – Answer Key</i>	1. Print/photocopy <i>Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) worksheet</i> (one per participant) 2. Print/photocopy <i>Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Religious/Cultural Values and Respect/Empathy for all Patients slide presentation</i>	1. Prepare <i>Religious/Cultural Values and Respect/Empathy for all Patients</i> slide presentation for viewing	20 minutes
REVIEW	• <i>Ethical and Legal Issues in Healthcare Student Workbook</i> • <i>Religious/Cultural Values and Respect/Empathy for all Patients Post-Test</i> • <i>Religious/Cultural Values and Respect/Empathy for all Patients Post-Test – Answer Key</i>	1. Print/photocopy <i>Religious/Cultural Values and Respect/Empathy for all Patients Post-Test</i> (one per participant)	20 minutes

Lesson Nine – Religious/Cultural Values and Respect/Empathy for all Patients

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) worksheet*
- *Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) Instructor Resource*
- *Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test*
- *Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) worksheets* prior to or at the beginning of class.
2. Have the *Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) Instructor resource* page available.
3. Distribute the *Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test*
4. Have the *Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test – Answer Key* available.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Roberto is a registered nurse in the emergency department and receives a female patient named Bahija, who is 7-months pregnant, complaining of a sudden onset of vaginal bleeding and abdominal pain after a vehicle accident. Bahija had the passenger airbag deploy into her stomach, and this is her second pregnancy.

The paramedics tell Roberto that her husband, Arif, was the driver, and he is in another trauma room with a possible cervical injury and fractured femur. Before the paramedics loaded Bahija into the ambulance, Arif told them that they are Muslim and cannot have certain medications and foods. Arif asked for female healthcare workers to treat Bahija if possible. He also said she does not speak English, so she will need an interpreter.

REFLECT on the situation:

What emotions do you think Bahija feels after being involved in the vehicle accident?

I think Bahija would feel scared and alone. I believe she would be concerned about the baby and Arif and would feel frightened that she cannot communicate with anyone in the hospital.

How do you think Roberto can make Bahija feel more comfortable in this emergency?

Roberto could make Bahija more comfortable by immediately requesting an interpreter and a female staff member.

What emotions do you think Arif would be feeling?

I believe Arif would be feeling scared, helpless, and unsure of the situation. I think Arif would be most concerned about the status of his wife and unborn child but would feel helpless by not being able to be with Bahija.

SHARE your thoughts with a peer when it's discussion time.

Religious/Cultural Values and Respect/Empathy for all Patients (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Roberto is a registered nurse in the emergency department and receives a female patient named Bahija, who is 7-months pregnant, complaining of a sudden onset of vaginal bleeding and abdominal pain after a vehicle accident. Bahija had the passenger airbag deploy into her stomach, and this is her second pregnancy.

The paramedics tell Roberto that her husband, Arif, was the driver, and he is in another trauma room with a possible cervical injury and fractured femur. Before the paramedics loaded Bahija into the ambulance, Arif told them that they are Muslim and cannot have certain medications and foods. Arif asked for female healthcare workers to treat Bahija if possible. He also said she does not speak English, so she will need an interpreter.

REFLECT on the situation:

What emotions do you think Bahija feels after being involved in the vehicle accident?

How do you think Roberto can make Bahija feel more comfortable in this emergency?

What emotions do you think Arif would be feeling?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as one of the ethical aspects regarding religious and cultural values as they impact healthcare?
 - a. Age
 - b. Gender
 - c. Race
 - d. Ethnicity
2. Which three factors do doctors believe link health and gender?
 - a. Physiological, psychological, and genetic
 - b. Physiological, hormonal, and genetic
 - c. Psychological, hormonal, and genetic
 - d. Biological, physiological, and hormonal
3. Many religions choose what types of beliefs over medicine?
 - a. Faith and spiritual
 - b. Family and faith
 - c. Religious and cultural
 - d. Faith and religious
4. Which of these is **not** a religion that was covered in the lesson?
 - a. Amish
 - b. Muslims
 - c. Buddhists
 - d. Jehovah's Witnesses
5. What religious group does not believe in blood transfusions?
 - a. Buddhists
 - b. Muslims
 - c. Amish
 - d. Jehovah's Witnesses

Religious/Cultural Values and Respect/Empathy for all Patients Pre-Test – Answer Key

1. Which of these is **not** mentioned as one of the ethical aspects regarding religious and cultural values as they impact healthcare?
 - a. **Age**
 - b. Gender
 - c. Race
 - d. Ethnicity
2. Which three factors do doctors believe link health and gender?
 - a. Physiological, psychological, and genetic
 - b. **Physiological, hormonal, and genetic**
 - c. Psychological, hormonal, and genetic
 - d. Biological, physiological, and hormonal
3. Many religions choose what types of beliefs over medicine?
 - a. **Faith and spiritual**
 - b. Family and faith
 - c. Religious and cultural
 - d. Faith and religious
4. Which of these is **not** a religion that was covered in the lesson?
 - a. Amish
 - b. Muslims
 - c. **Buddhists**
 - d. Jehovah's Witnesses
5. What religious group does not believe in blood transfusions?
 - a. Buddhists
 - b. Muslims
 - c. Amish
 - d. **Jehovah's Witnesses**

Lesson Nine – Religious/Cultural Values and Respect/Empathy for all Patients

LEARN: Religious/Cultural Values and Respect/Empathy for all Patients Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to religious and cultural values as they impact healthcare. Participants will learn about the importance of treating all patients with respect and empathy and how to provide excellent customer service. Participants will learn the laws governing harassment and how to file an incident report if healthcare professionals or patients are harassed.

Materials:

- *Religious/Cultural Values and Respect/Empathy for all Patients* slide presentation
- *Religious/Cultural Values and Respect/Empathy for all Patients Presentation Guide*
- *Religious/Cultural Values and Respect/Empathy for all Patients Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Religious/Cultural Values and Respect/Empathy for all Patients Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 9: Religious/Cultural Values and Respect/Empathy for all Patients.

Slide 2: The goals and objectives of this lesson are:

- Examine religious and cultural values as they impact healthcare

- Discuss how to ensure respectful and empathetic treatment of all patients
- Describe how to provide excellent customer service, civility, and patient satisfaction
- Identify the laws governing harassment and how to file an incident report

Slide 3: There are many ethical aspects regarding religious and cultural values as they impact healthcare. The topics covered in this lesson are:

- Ethnicity
- Gender
- Race
- Religion

Each topic is covered in-depth on the following slides.

Slide 4: Ethnicity is defined as “the fact or state of belonging to a social group that has a common national or cultural tradition.” These groups of people share attributes such as:

- Traditions
- Language
- Ancestry
- Society
- Culture
- Religion

The impact that ethnicity has in the healthcare setting can be attributed to cultural awareness on both the healthcare professional and the patient. Identifying cultural barriers can help the healthcare provider understand how to treat the patient best while keeping with the patient’s customs. Living in a multicultural society, differences in customs can lead to misunderstandings and confusion between the

patient and the healthcare professional. This confusion can lead to the patient not adhering to their treatment plans and distrust of their healthcare provider. Healthcare professionals can develop cultural awareness and improve their patient's health by following these steps:

- Communicate clearly with your patient and arrange for a professional translator if needed.
- Be aware of non-verbal clues and body language. Some customs believe it is rude to look another person directly in the eyes.
- Ask about the patient's traditions and customs. Incorporate any dietary considerations, spiritual or religious beliefs, and their cultural norm into their treatment plan.

Above all, respect the patient's decision, even if you are not familiar with their customs.

Slide 5: The impact that gender has on healthcare are:

- The biological factors that differentiate men and women. Men and women are inherently different, and researchers believe anatomy, genes, and hormones are components for men having an increased risk for certain diseases. Additionally, men typically eat less healthy diets and engage in risky behaviors that lead to higher rates of disease and injury.
- The differences in access to resources. A study showed that across the United States, the country's Northeastern region has more significant healthcare resources and fewer gender disparities than other states. The access to preventative care and healthcare treatments resulted in overall better health outcomes for both sexes.
- Gender biases. Unfortunately, gender bias is often seen in healthcare across many specialties. The definition of gender bias is "prejudice in action or treatment against a person on the basis of their sex." In the healthcare setting, it refers to patients who are assessed, diagnosed, and offered different treatment plans and a lower quality of care based on their gender. Often, the healthcare professional does not knowingly

have a gender bias; they merely assume females and males are the same and treat them as such. However, the sexes have different needs that need to be addressed. Diseases and health conditions affect both sexes but in varying degrees. Doctors believe complicated physiological, hormonal, and genetic factors link health and gender. Healthcare professionals realize that certain diseases and their signs and symptoms affect each sex differently. Heart attacks often cause different symptoms for women than for men and are often misdiagnosed. Hormonal factors contribute to the shape of men and women, which leads to where each sex gains weight. For example, men typically put on weight around the middle of the body, which increases their risk of heart disease. When medical professionals understand the different factors that affect each sex and its relation to their health, men and women will have better treatment and better health outcomes.

Slide 6: Race refers to a group of people with common physical traits, such as hair texture, skin color, eye formation, and facial features.

Race can also be associated with geographically separated populations, such as African American, Asian, European, and Latino.

There are several areas of how race impacts healthcare. One area is that a person's race can determine if they are more susceptible to certain diseases. Biomedical researchers and clinicians use a person's race to link an individual's ancestry and predict whether that person carries specific genetic risk factors that could influence their health or make them more susceptible to particular diseases. Making accurate predictions based on race is critical because some diseases and drug responses are influenced by genetic variances that differ among racial groups. This is important for healthcare professionals to understand so that accurate assessments, diagnoses, and treatment can be given.

Another area where race impacts healthcare is the racial disparities found in certain groups. Various statistics have shown that the differences stem from lack of access to

healthcare, lack of preventative care, lack of diversity in healthcare professionals, and social determinants of health.

Slide 7: The impact religion has on healthcare is that patients' religious or spiritual beliefs can keep them from seeking medical care, make them decline medications, and make them refuse life-saving procedures.

Many religions choose their faith and spiritual beliefs over medicine.

This lesson will explore three religions and their beliefs regarding healthcare:

1. Jehovah's Witnesses
2. Muslims
3. Amish

The following slides will go over each religion in detail.

Slide 8: A common misconception about Jehovah's Witnesses (or Witnesses) is that they refuse medical care or treatment. Witnesses **do** seek the best possible care for themselves and their families. However, Witnesses **do not** accept blood transfusions and only accept non-blood alternatives, even in life-or-death situations. If needed, witnesses have Hospital Liaison Committees, which are the liaison between the patient and medical professionals and hospitals.

Slide 9: Several ethnicities comprise the Muslim faith with diverse views regarding healthcare and illness. Healthcare professionals should be aware of certain aspects of the Muslim faith, including:

- Diet: Islam rules prohibit alcohol, pork, animals that have not been slaughtered in the name of Allah (the Abrahamic God), pork byproducts, and non-Halal animal fats (Halal translates as permissible). Many Muslim patients will refuse to eat hospital food and will have food delivered by a family member. Muslims pray many times a day, which may interfere with standard hospital eating times.
- Medications: medicine that contains gelatin or pork-based products is forbidden. Gelatin-free alternatives are allowed. During Ramadan, when Muslims fast, certain

medications are acceptable, and some are not.

- Fasting: when Muslim patients are fasting during Ramadan, specific procedures and medications that are acceptable when not fasting may be unacceptable. It is best to ask the patient what they can and cannot take.
- Privacy and dress: Muslims are very private and modest people, especially women. Most prefer to be treated by a healthcare professional of the same gender, especially if they require obstetrics or gynecological care. If gender-specific care is not possible, it is recommended that the spouse, another relative, or a female staff member be present. Both men and women are reluctant to expose their bodies. Care should be taken to respect their modesty and privacy.
- Touch and eye contact: female patients will often avoid eye contact or shaking hands with male healthcare professionals. Usually, if a male is tending to a female patient, the woman will have her spouse or another relative answer the healthcare provider's questions. This is not due to a lack of trust or respect; this is a sign of modesty.

Slide 10: The Amish live a simple life and prefer natural remedies to modern healthcare. They do seek healthcare in emergencies but reject extraordinary measures to save a life. They also do not believe in:

- Birth control: the Amish do not use birth control since they believe it would be interfering with God's will.
- Health insurance coverage: instead of paying for health insurance coverage, the Amish pay for health procedures out-of-pocket and in cash. Some Amish communities have a foundation where every family pays a low monthly fee, and when someone needs medical services, the foundation pays the bills.
- Prenatal diagnostic testing: the Amish do not believe in invasive prenatal diagnostic testing such as amniocentesis. They do believe in prenatal care, but due to cost and the distance to a healthcare provider, they limit the number of visits.
- Immunizations: while the Amish faith does not have a rule about vaccinations,

many Amish are not vaccinated, primarily because they lack the education about vaccines. A small population of Amish is vaccinated, while a larger percentage of Amish said they would be willing to be vaccinated if they had more information.

- Abortions: the Amish community does not believe in abortions, even when the pregnancy is life-threatening to the mother.

Slide 11: Respect is the term used to accept someone for who they are even if they are different from you or if you disagree with them. Respect also means that you have a deep feeling of admiration for someone or something based on their qualities, abilities, or achievements.

Empathy refers to having the ability to understand and share the feelings of others. Empathy and sympathy are often confused. Empathy means that you have an emotional component of experiencing another person's feelings. Sympathy is more distant, where a person can understand someone else's suffering. Studies where patients were polled about respect and empathy by healthcare professionals show that healthcare professionals' empathy and respect improve health outcomes, builds trust, and calms anxiety. Other research has shown respect, empathy, and compassion to be associated with decreased malpractice suits, fewer mistakes, better adherence to medications, and increased patient satisfaction.

Slide 12: The healthcare industry is a customer service industry that relies on its employees to provide excellent service to their patients. The goal of every healthcare professional should be to develop long-term relationships with a patient-centered approach versus treating each patient like a monetary transaction. One aspect of providing excellent customer service is being civil, which means being polite and courteous in speech and behavior. Other components of delivering excellent customer service include:

- Greeting the patients by their name
- Keeping wait times short
- Answering all questions during their exam without them feeling rushed
- Inform and explain

- Remember their families
- Respond quickly to their needs

The patient's satisfaction with their healthcare provider's customer service and civility is used to measure the quality of the healthcare they receive. How satisfied a patient is affects:

- Clinical outcomes: when a patient is treated with respect and dignity and is provided an excellent customer service experience, their health outcomes are enhanced and they. They are more likely to listen to their healthcare professional, be honest with their concerns and past medical history, adhere to medications, follow the treatment plan, and keep follow-up appointments.
- Medical malpractice claims: medical malpractice lawsuits decrease when patients believe they have had good customer service, which develops trust.
- Patient retention: when patients have had quality experiences with their healthcare providers, they remain long-term patients. They also refer friends and family, increasing the revenue for the healthcare practice.

Slide 13: Title VII of the Civil Rights Act requires healthcare employers to protect their employees from discrimination and harassment, whether the aggressor is a patient, coworker, or supervisor. While a patient can file a report of harassment against a healthcare professional, most incident reports filed are charges against a coworker, supervisor, or patient. Harassment is defined as "aggressive pressure or intimidation." The different types of harassment are:

- Verbal/Written: this type of harassment can be verbal or in the written form. A few examples are requests for sexual favors, inappropriate emails, comments about appearance, and suggestive remarks or sounds.
- Physical: touching, brushing against the body, stroking, hugging, kissing, and other unwanted physical touch is physical harassment.
- Non-verbal: some signs of non-verbal harassment are making sexual gestures, winking, following the person, blocking their path, and giving gifts.

Ethical and Legal Issues in Healthcare

- Visual: visual harassment can be offensive pictures, pornography, screensavers, and sexual exposure.
- Psychological: described as repeated undesired proposals, contact, or social invitations that lead to stress and anxiety.

Slide 14: For any harassment against a healthcare professional or a patient, an incident report needs to be filed. Incident reports will include the injured person's name and other identifying information, details about the incident, where the incident happened, the aggressor's information, and any actions taken. When a healthcare professional is hired, they should be informed of their employer's policies regarding filing an incident report and the proper reporting channels.

Name: _____ Class: _____

Religious/Cultural Values and Respect/Empathy for all Patients Presentation Guide

Complete the following information as you listen to the Religious/Cultural Values and Respect/Empathy for all Patients presentation.

Religious and Cultural Values Impacting Healthcare

There are many ethical aspects regarding religious and cultural values as they impact healthcare. The topics covered in this lesson are:

- Ethnicity
- Gender
- Race
- Religion

Ethnicity

Ethnicity is defined as: _____

These groups of people share attributes such as:

- Traditions
- _____
- _____
- Society
- Culture
- _____

Gender

The impact that gender has on healthcare are:

- The _____ factors that differentiate men and women
- The differences in access to _____
- Gender biases

Diseases and health conditions affect _____, but in varying degrees. Doctors believe that complicated physiological, hormonal, and genetic factors link health and gender.

Race

Race refers to a _____ who have common physical traits, such as hair texture, skin color, eye formation, and facial features.

Race can also be associated with _____, such as African American, Asian, European, and Latino.

Religion

The impact religion has on healthcare is that patient's _____ or _____ beliefs can keep them from seeking medical care, declining medications, and refusing life-saving procedures.

Many religions choose their faith and spiritual beliefs over _____.

This lesson will explore three religions and their beliefs regarding healthcare:

1. Jehovah's Witnesses
2. Muslims
3. Amish

Jehovah's Witnesses

A common misconception about Jehovah's Witnesses (or Witnesses) is that they _____ medical care or treatment. Witnesses **do** seek the best possible care for themselves and their families.

However, Witnesses _____ accept blood transfusions and only _____ non-blood alternatives, even in a life-or-death situation.

Witnesses have Hospital Liaison Committees which are the liaison between the patient and medical professionals and hospitals, if needed.

Muslims

Several ethnicities comprise the Muslim faith with diverse views regarding healthcare and illness.

Healthcare professionals should be aware of certain aspects of the Muslim faith, including:

- _____
- Medications
- _____
- Privacy and dress
- Touch and eye contact

The Amish

The Amish live a simple life and prefer _____ to modern healthcare. They do seek healthcare in emergencies but reject extraordinary measures to save a life. They also do not believe in:

- _____
- Health insurance coverage
- Prenatal diagnostic testing
- _____
- Abortions

Respectful and Empathetic Treatment of all Patients

Respect is the term used for accepting someone _____ even if they are different from you, or you do not agree with them.

Empathy refers to having the ability to _____

Studies show that empathy and respect given to patients by healthcare professionals improves health outcomes, builds _____, calms _____, and decreases malpractice suits.

Customer Service, Civility, and Patient Satisfaction

The healthcare industry is a _____ industry that relies on their employees to provide excellent service to their patients.

One aspect of providing wonderful customer service is the act of being _____, which is being polite and courteous in speech and behavior.

The patient's satisfaction with their healthcare providers' customer service and civility is used to measure the quality of healthcare they receive. How satisfied a patient is affects:

- Clinical outcomes
- _____
- Patient retention

Laws Governing Harassment

Title VII of the Civil Rights Act requires healthcare employers to protect their employees from _____ and _____, whether the aggressor is a patient, coworker, or supervisor.

Harassment is defined as "aggressive pressure or intimidation." There are different types of harassment, which are:

- Verbal/Written
- _____
- Non-verbal
- _____
- _____

Incident Report

For any type of harassment against a healthcare professional or a patient, an _____ needs to be filed.

Incident reports will include the injured person's name and other identifying information, details about the incident, where the incident happened, the aggressor's information, and any actions that were taken.

Religious/Cultural Values and Respect/Empathy for all Patients Presentation Guide – Answer Key

Religious and Cultural Values Impacting Healthcare

There are many ethical aspects regarding religious and cultural values as they impact healthcare. The topics covered in this lesson are:

- Ethnicity
- Gender
- Race
- Religion

Ethnicity

Ethnicity is defined as: **the fact or state of belonging to a social group that has a common national or cultural tradition.**

These groups of people share attributes such as:

- Traditions
- **Language**
- **Ancestry**
- Society
- Culture
- **Religion**

Gender

The impact that gender has on healthcare are:

- The **biological** factors that differentiate men and women
- The differences in access to **resources**
- Gender biases

Diseases and health conditions affect **both sexes**, but in varying degrees. Doctors believe that complicated physiological, hormonal, and genetic factors link health and gender.

Race

Race refers to a **group of people** who have common physical traits, such as hair texture, skin color, eye formation, and facial features.

Race can also be associated with **geographically separated populations**, such as African American, Asian, European, and Latino.

Religion

The impact religion has on healthcare is that patient's **religious** or **spiritual** beliefs can keep them from seeking medical care, declining medications, and refusing life-saving procedures.

Many religions choose their faith and spiritual beliefs over **medicine**.

This lesson will explore three religions and their beliefs regarding healthcare:

1. Jehovah's Witnesses

2. Muslims
3. Amish

Jehovah's Witnesses

A common misconception about Jehovah's Witnesses (or Witnesses) is that they **refuse** medical care or treatment. Witnesses **do** seek the best possible care for themselves and their families.

However, Witnesses **do not** accept blood transfusions and only **accept** non-blood alternatives, even in a life-or-death situation.

Witnesses have Hospital Liaison Committees which are the liaison between the patient and medical professionals and hospitals, if needed.

Muslims

Several ethnicities comprise the Muslim faith with diverse views regarding healthcare and illness. Healthcare professionals should be aware of certain aspects of the Muslim faith, including:

- **Diet**
- Medications
- **Fasting**
- Privacy and dress
- Touch and eye contact

The Amish

The Amish live a simple life and prefer **natural remedies** to modern healthcare. They do seek healthcare in emergencies but reject extraordinary measures to save a life. They also do not believe in:

- **Birth control**
- Health insurance coverage
- Prenatal diagnostic testing
- **Immunizations**
- Abortions

Respectful and Empathetic Treatment of all Patients

Respect is the term used for accepting someone **for who they are** even if they are different from you, or you do not agree with them.

Empathy refers to having the ability to **understand and share the feelings of others.**

Studies show that empathy and respect given to patients by healthcare professionals improves health outcomes, builds **trust**, calms **anxiety**, and decreases malpractice suits.

Customer Service, Civility, and Patient Satisfaction

The healthcare industry is a **customer service** industry that relies on their employees to provide excellent service to their patients.

One aspect of providing wonderful customer service is the act of being **civil**, which is being polite and courteous in speech and behavior.

The patient's satisfaction with their healthcare providers' customer service and civility is used to measure the quality of healthcare they receive. How satisfied a patient is affects:

- Clinical outcomes

- **Medical malpractice claims**
- Patient retention

Laws Governing Harassment

Title VII of the Civil Rights Act requires healthcare employers to protect their employees from **discrimination** and **harassment**, whether the aggressor is a patient, coworker, or supervisor.

Harassment is defined as “aggressive pressure or intimidation.” There are different types of harassment, which are:

- Verbal/Written
- **Physical**
- Non-verbal
- **Visual**
- **Psychological**

Incident Report

For any type of harassment against a healthcare professional or a patient, an **incident report** needs to be filed.

Incident reports will include the injured person’s name and other identifying information, details about the incident, where the incident happened, the aggressor’s information, and any actions that were taken.

Lesson Nine – Religious/Cultural Values and Respect/Empathy for all Patients

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on Religious/Cultural Values and Respect/Empathy for all Patients.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Religious/Cultural Values and Respect/Empathy for all Patients Post-Test*
- *Religious/Cultural Values and Respect/Empathy for all Patients Post-Test – Answer Key*

Facilitation Steps:

1. Divide participants into pairs or small groups. Share the following scenario:

Kia comes to her first prenatal appointment with her boyfriend Hakim. She scheduled it as early as possible, 8:30 a.m., so that she won't miss much work at her daycare job. She has been experiencing some light spotting and wonders if everything is normal and okay. Her sister had a miscarriage recently and she is afraid that it will happen to her. Her husband doesn't understand English very well and she wants him to understand what she hears.

Using the customer service strategies for providing excellent service that participants have learned in this lesson, they should discuss what they would say or do in this scenario.

Customer Service Tactic

1. Greet the patient by name
2. Keep wait times short
3. Answer all questions during the exam without feeling rushed
4. Inform and explain
5. Remember their families
6. Respond quickly to their needs

2. Have participants complete the student workbook pages: Cultural Values and Harassment Policy.
3. Instruct participants to take a few minutes to complete the post-test.
4. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.

4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Religious/Cultural Values and Respect/Empathy for all Patients Post-Test

Select the best answer to the following multiple-choice questions:

1. Which of these is **not** mentioned as one of the ethical aspects regarding religious and cultural values as they impact healthcare?
 - a. Age
 - b. Gender
 - c. Race
 - d. Ethnicity
2. Which three factors do doctors believe link health and gender?
 - a. Physiological, psychological, and genetic
 - b. Physiological, hormonal, and genetic
 - c. Psychological, hormonal, and genetic
 - d. Biological, physiological, and hormonal
3. Many religions choose what types of beliefs over medicine?
 - a. Faith and spiritual
 - b. Family and faith
 - c. Religious and cultural
 - d. Faith and religious
4. Which of these is **not** a religion that was covered in the lesson?
 - a. Amish
 - b. Muslims
 - c. Buddhists
 - d. Jehovah's Witnesses
5. What religious group does not believe in blood transfusions?
 - a. Buddhists
 - b. Muslims
 - c. Amish
 - d. Jehovah's Witnesses

Religious/Cultural Values and Respect/Empathy for all Patients Post-Test – Answer Key

1. Which of these is **not** mentioned as one of the ethical aspects regarding religious and cultural values as they impact healthcare?
 - a. **Age**
 - b. Gender
 - c. Race
 - d. Ethnicity
2. Which three factors do doctors believe link health and gender?
 - a. Physiological, psychological, and genetic
 - b. **Physiological, hormonal, and genetic**
 - c. Psychological, hormonal, and genetic
 - d. Biological, physiological, and hormonal
3. Many religions choose what types of beliefs over medicine?
 - a. **Faith and spiritual**
 - b. Family and faith
 - c. Religious and cultural
 - d. Faith and religious
4. Which of these is **not** a religion that was covered in the lesson?
 - a. Amish
 - b. Muslims
 - c. **Buddhists**
 - d. Jehovah's Witnesses
5. What religious group does not believe in blood transfusions?
 - a. Buddhists
 - b. Muslims
 - c. Amish
 - d. **Jehovah's Witnesses**

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Lesson Ten – Ethical Issues Involving Lack of Capacity and End-of-Life Care

Lesson Overview

In this lesson, participants will learn about patients' decision-making capacity and their right to refuse medical care. Participants will be educated on withholding and withdrawing life-sustaining treatment, "no codes," medical futility, and physician-assisted suicide.

Lesson Objectives

After completing this lesson, participants will be able to:

- Examine patients' decision-making capacity and right to refuse medical care
- Discuss withholding and withdrawing life-sustaining treatment
- Describe decisions regarding "no codes"
- Identify what is medical futility
- Explain assisted suicide in a medical setting

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy) worksheet</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy) Instructor Resource</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test – Answer Key</i>	1. Print/photocopy <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy) worksheet</i> (one per participant) 2. Print/photocopy <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test</i> (one per participant)	20 minutes
LEARN	• <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care slide presentation</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide – Answer Key</i>	1. Prepare <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care slide presentation</i> for viewing 2. Print/photocopy <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide</i> (one per participant)	20 minutes
REVIEW	• <i>Ethical and Legal Issues in Healthcare Student Workbook</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test</i> • <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test – Answer Key</i>	1. Print/photocopy <i>Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test</i> (one per participant)	20 minutes

Lesson Ten – Ethical Issues Involving Lack of Capacity and End-of-Life Care

FOCUS: Developing Awareness of Patient-Focused Care

20 minutes

Purpose:

To help participants develop an awareness of patient-focused care.

Materials:

- *Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy)* worksheet
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy)* Instructor Resource
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test*
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy)* worksheets prior to or at the beginning of class.
2. Have the *Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy)* Instructor Resource page available.
3. Distribute the *Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test*.
4. Have the *Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test – Answer Key* available.
5. Have participants read through the information and complete the worksheet and pre-test.
6. Collect the pre-tests.
7. Have participants pair up after completion and share answers from the worksheet.

Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy) Instructor Resource

Skill: To foster empathy and sensitivity

READ the following:

Dr. Baker has been a family physician for 30 years. He has a patient named Mabel, who he has seen since he started his practice. She is 88 years old and has been recently diagnosed with stage 4 cancer. Her oncologist, Dr. Murphy, has given Mabel two to three months to live. Her family has suggested that Mabel seek another opinion or see if there is an alternative treatment, but Mabel refuses. She trusts her doctors and feels that at her age, there is no use.

Mabel has asked Dr. Murphy to give her a prescription that will put her to sleep forever. She explains to her oncologist how she is in pain and tired of being miserable. Dr. Murphy refuses to assist Mabel and says he does not feel comfortable helping Mabel with her death. Mabel makes an appointment with her family physician, Dr. Baker, to see if he will help.

REFLECT on the situation:

What emotions do you think Mabel feels after Dr. Murphy refused to help her?

I think Mabel would feel sad and hopeless after Dr. Murphy refused to help her. I think she would feel slightly hopeful that Dr. Baker would be compassionate enough to assist her.

How do you think Dr. Baker will respond to Mabel's request?

It is hard to say how Dr. Baker might respond. He might be more willing to help Mabel since he has known her for 30 years and does not want her to be miserable and in pain.

What emotions do you think Mabel's family would be feeling?

I think Mabel's family would be feeling sad and desperate to find a cure or an alternative type of treatment. I think if they knew of Mabel's wishes to end her life, they would be devastated, but understanding due to her age and the pain she is. I think they would want her not to suffer anymore.

SHARE your thoughts with a peer when it's discussion time.

Ethical Issues Involving Lack of Capacity and End-of-Life Care (Focus on Empathy)

Skill: To foster empathy and sensitivity

READ the following:

Dr. Baker has been a family physician for 30 years. He has a patient named Mabel, who he has seen since he started his practice. She is 88-years-old and has been recently diagnosed with stage 4 cancer. Her oncologist, Dr. Murphy, has given Mabel two to three months to live. Her family has suggested that Mabel seek another opinion or see if there is an alternative treatment, but Mabel refuses. She trusts her doctors and feels that at her age, there is no use.

Mabel has asked Dr. Murphy to give her a prescription that will put her to sleep forever. She explains to her oncologist how she is in pain and tired of being miserable. Dr. Murphy refuses to assist Mabel and says he does not feel comfortable helping Mabel with her death. Mabel makes an appointment with her family physician, Dr. Baker, to see if he will help.

REFLECT on the situation:

What emotions do you think Mabel feels after Dr. Murphy refused to help her?

How do you think Dr. Baker will respond to Mabel's request?

What emotions do you think Mabel's family would be feeling?

SHARE your thoughts with a peer when it's discussion time.

Name: _____ Class: _____

Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test

Select the best answer to the following multiple-choice questions:

1. A DNR is what kind of directive?
 - a. Advance
 - b. Simple
 - c. Verbal
 - d. Competent
2. Which of the following is true about life-sustaining treatment?
 - a. Prolongs life after reversing the underlying medical condition
 - b. Decreases longevity without reversing the underlying medical condition
 - c. Prolongs life while reversing the underlying medical condition
 - d. Prolongs life without reversing the underlying medical condition
3. When a patient chooses physician-assisted suicide, they must be terminal with how long to live?
 - a. Three months or less
 - b. One year or less
 - c. Six months or less
 - d. One month or less
4. Who administers the lethal dose in physician-assisted suicide?
 - a. The physician
 - b. The patient
 - c. A hospice nurse
 - d. A family member
5. Who must sign the DNR order for it to be valid?
 - a. Only the physician
 - b. The patient and a family member
 - c. The patient and physician
 - d. Only the patient

Ethical Issues Involving Lack of Capacity and End-of-Life Care Pre-Test – Answer Key

1. A DNR is what kind of directive?
 - a. Advance**
 - b. Simple
 - c. Verbal
 - d. Competent
2. Which of the following is true about life-sustaining treatment?
 - a. Prolongs life after reversing the underlying medical condition
 - b. Decreases longevity without reversing the underlying medical condition
 - c. Prolongs life while reversing the underlying medical condition
 - d. Prolongs life without reversing the underlying medical condition**
3. When a patient chooses physician-assisted suicide, they must be terminal with how long to live?
 - a. Three months or less
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 - c. Six months or less**
 - d. One month or less
4. Who administers the lethal dose in physician-assisted suicide?
 - a. The physician
 - b. The patient**
 - c. A hospice nurse
 - d. A family member
5. Who must sign the DNR order for it to be valid?
 - a. Only the physician
 - b. The patient and a family member
 - c. The patient and physician**
 - d. Only the patient

Lesson Ten – Ethical Issues Involving Lack of Capacity and End-of-Life Care

LEARN: Ethical Issues Involving Lack of Capacity and End-of-Life Care Slide Presentation

30 minutes

Purpose:

Participants will receive a thorough introduction to patients' decision-making capacity and right to refuse medical care. Participants will learn about withholding and withdrawing life-sustaining treatment. Participants will learn about “no codes,” medical futility, and assisted suicide.

Materials:

- *Ethical Issues Involving Lack of Capacity and End-of-Life Care* slide presentation
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide*
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide – Answer Key*

Facilitation Steps:

1. Give each participant the *Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide*. They should complete the information as the slide presentation is shared. Share the following information as you show the slide presentation.

Share the following information as you show the slide presentation.

Slide 1: Introduction Slide to Lesson 10: Ethical Issues Involving Lack of Capacity and End-of-Life Care.

Slide 2: The goals and objectives of this lesson are to:

- Examine patients' decision-making capacity and right to refuse medical care

- Discuss withholding and withdrawing life-sustaining treatment
- Describe decisions regarding “no codes”
- Identify what is medical futility
- Explain assisted suicide in a medical setting

Slide 3: Adult patients who are of sound mind have the capacity to make decisions regarding their medical care and treatment after informed consent is given. They then have the right to refuse medical care if they wish, and healthcare professionals need to honor their wishes. Patients who cannot make decisions on their own include:

- **Adults with an altered mental status:** patients who have an altered mental status due to drugs, alcohol, a psychiatric illness, or a brain injury do not have the right to refuse medical treatment.
- **Children:** patients under 18 cannot refuse medical care unless a court has emancipated them. However, some states have enacted laws that let children as young as twelve years make medical decisions for themselves, including the right to refuse medical care. If working as a healthcare professional, you will be required to know the laws in the state in which you work.
- **Those who are a threat to the community:** if a patient refuses medical care, their refusal cannot pose a threat to the community. For example, a patient cannot refuse treatment or isolation if they have a communicable disease that poses a threat to the community. Another example would be a mentally unstable patient who is a threat to themselves or others.

Informed consent is an “agreement or permission to do something from someone who has been given full information about the possible effects or result.” For example, a physician will give a patient information about a test or treatment, including the risks and benefits. The patient is informed and they have the right to make decisions about their health and treatment. If they agree to a test or procedure, they have been informed and have given consent.

Slide 4: Life-sustaining treatment prolongs life without reversing the underlying medical condition, which includes:

- CPR
- Dialysis
- Antibiotics
- Mechanical ventilation
- Left ventricular assist devices
- Artificial hydration and nutrition

In the United States, studies show there is a general consensus in the ethical, medical, and legal communities that withholding and withdrawing life-sustaining treatment at the end of a person’s life are morally acceptable. However, it is emotionally challenging for everyone involved. Many people believe that withholding and withdrawing treatment is similar to euthanasia. The difference is that euthanasia actively seeks to end the patient’s life, where withholding and withdrawing treatment allows the disease to progress on its natural course. Ultimately, the patient decides to choose what they think is best for them.

Slide 5: A “no code” is also known as a “do not resuscitate (DNR) order.” A do not resuscitate (DNR) order is a legal document signed by the patient and their physician stating that the patient does not wish to have resuscitative efforts if their heart stops beating or they stop breathing. Sometimes a DNR will also include preventing other medical interventions, such as life-sustaining treatment. This order is called an **advance directive** because it is drawn up and signed in advance of any event where resuscitation efforts might be performed. It is more than the expressed wishes of the patient or family. It is an actual, legal document. The DNR has to be produced to medical professionals for

the patient’s wishes to be valid. If the DNR is not with the patient, taped to the wall by their bed, or produced by the family or physician, resuscitative efforts will begin.

2. Have participants pair up. Using the internet, have participants research and find a sample do not resuscitate order (DNR) and see what types of fields there are for a patient to fill out. Allow 5 minutes.
3. Call the class back together and ask what types of questions or information is asked for on an DNR order.

Continue with the slide presentation.

Slide 6: The definition of medical futility is that “any treatment that, within a reasonable degree of medical certainty, is seen to be without benefit to the patient, as when the treatment at issue is seen as ineffective with regard to a clinical problem that it would ordinarily be used to treat.” Put another way, the proposed medical treatment should not be performed if available data shows that it will not benefit the patient. For example, it would be considered medical futility if a surgeon performed an operation on a terminal patient knowing the surgery would not positively increase the outcome for their patient. Futile care does not offer benefits to the patient and diverts resources from a patient who could benefit from the care. Proponents against providing futile care say there are ethical, spiritual, emotional, and financial hardships that harm the patients and their families.

Slide 7: If requested, a doctor assists a patient to commit suicide by providing drugs for self-administration after specific terms are met. These include:

- Terminal illness with six months or less to live
- The patient is of sound mind
- Voluntary act with the patient repeatedly asking for help to end their life
- The patient administers the lethal dose after the doctor prescribes the medication

Often called physician-assisted suicide, it is legal only in certain countries and states. In the US, there are currently 11 jurisdictions that allow physician-assisted suicide. States that allow physician-assisted suicide are exempt

from criminal prosecution under the “death with dignity” laws. These laws stem from the belief that terminally ill patients should have the right to make their end-of-life decisions, not the government. While some people believe this is unethical for physicians to assist with suicide since they are healers and have taken the Hippocratic Oath, supporters of the laws believe that it is the patient’s choice. The doctor is only prescribing the medication, not administering it.

4. Review the answers on the Presentation Guide if desired.

Name: _____ Class: _____

Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide

Complete the following information as you listen to the Ethical Issues Involving Lack of Capacity and End-of-Life Care presentation.

Patient's Decision-Making Capacity and Right to Refuse Medical Care

Adult patients who are of sound mind have the capacity to _____ regarding their medical care and treatment after _____ is given. They then have the right to _____ medical care if they wish.

Patients who cannot make decisions on their own include:

- Adults with an _____
- Children, unless they are emancipated by the court
- Those who are a _____ to the community

Withholding and Withdrawing Life-Sustaining Treatment

Life-sustaining treatment prolongs life without reversing the underlying medical condition, which includes:

- _____
- Dialysis
- _____
- Mechanical ventilation
- Left ventricular assist devices
- Artificial _____ and _____

Decisions Regarding "No Codes"

A "_____ " is also known as a "do not resuscitate (_____) order."

A do not resuscitate (DNR) order is a _____ signed by the patient and their physician, stating that the patient does not wish to have resuscitative efforts if their heart stops beating or they stop breathing. Sometimes a DNR will also include preventing other medical interventions, such as life-sustaining treatment.

Medical Futility

The definition of medical futility is "Futility means any treatment that, within a reasonable degree of medical certainty, is _____

_____, as when the treatment at issue is seen as ineffective with regard to a clinical problem that it would ordinarily be used to treat."

Put another way, the proposed medical treatment should not be performed if available data shows that it will _____ benefit the patient.

Assisted Suicide

If requested, a doctor assists a patient to commit suicide by providing drugs for self-administration after specific terms are met. These include:

- Terminal illness with _____
- The patient is of sound mind
- _____ act
- The patient administers the _____ dose

Often called _____ suicide, it is legal only in certain countries and states. In the US there are currently 11 jurisdictions which allow physician-assisted suicide.

Ethical Issues Involving Lack of Capacity and End-of-Life Care Presentation Guide – Answer Key

Patient's Decision-Making Capacity and Right to Refuse Medical Care

Adult patients who are of sound mind have the capacity to **make decisions** regarding their medical care and treatment after **informed consent** is given. They then have the right to **refuse** medical care if they wish.

Patients who cannot make decisions on their own include:

- Adults with an **altered mental status**
- Children, unless they are emancipated by the court
- Those who are a **threat** to the community

Withholding and Withdrawing Life-Sustaining Treatment

Life-sustaining treatment prolongs life without reversing the underlying medical condition, which includes:

- **CPR**
- Dialysis
- **Antibodies**
- Mechanical ventilation
- Left ventricular assist devices
- Artificial **hydration and nutrition**

Decisions Regarding “No Codes”

A “**no code**” is also known as a “do not resuscitate (**DNR**) order.”

A do not resuscitate (DNR) order is a **legal document** signed by the patient and their physician, stating that the patient does not wish to have resuscitative efforts if their heart stops beating or they stop breathing. Sometimes a DNR will also include preventing other medical interventions, such as life-sustaining treatment.

Medical Futility

The definition of medical futility is “Futility means any treatment that, within a reasonable degree of medical certainty, is **seen to be without benefit to the patient**, as when the treatment at issue is seen as ineffective with regard to a clinical problem that it would ordinarily be used to treat.”

Put another way, the proposed medical treatment should not be performed if available data shows that it will **not** benefit the patient.

Assisted Suicide

If requested, a doctor assists a patient to commit suicide by providing drugs for self-administration after specific terms are met. These include:

- Terminal illness with **6 months or less to live**
- The patient is of sound mind
- **Voluntary** act
- The patient administers the **lethal** dose

Often called **physician-assisted** suicide, it is legal only in certain countries and states. In the US there are currently 11 jurisdictions which allow physician-assisted suicide.

Lesson Ten – Ethical Issues Involving Lack of Capacity and End-of-Life Care

REVIEW: Activities and Post-Test

20 minutes

Purpose:

Participants will engage in activities based on Ethical Issues Involving Lack of Capacity and End-of-Life Care.

Materials:

- Ethical and Legal Issues in Healthcare Student Workbook
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test*
- *Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test – Answer Key*

Facilitation Steps:

1. Have participants research how long a patient will live after refusing dialysis. They should write a brief synopsis on what happens when a patient refuses or withdraws from this treatment.
2. Have participants complete the student workbook page: *Physician-Assisted Suicide and Euthanasia Debate*.
3. Instruct participants to take a few minutes to complete the post-test.
4. Have participants self-check their answers as you share from the answer key.

Legal and Ethical Scenarios

One legal and one ethical scenario relating to this lesson are provided in the student workbook to complete.

If you prefer to use the Scenario Cards to introduce the scenarios, here are a few ways you can do this.

A. Small Group Challenge:

1. Have participants work in 5 small groups to discuss the scenario and key questions. Participants may complete the student workbook scenario pages during small group discussion.
2. Bring the class back together and share answers to the key questions. Participant answers will vary.
3. For a variation, have half of the small groups discuss the legal scenario and the other group the ethical scenario. Then share as a whole group.

B. Think – Pair – Share

1. Divide the class into pairs. Display the first scenario on a document presenter or read it to the class.
2. Have each pair discuss the points of view listed on each card. Pairs should discuss how each person must feel, and what they must be thinking during the scenario. This will help develop empathy and sensitivity.
3. Call the class back together and share some insights into points of view.
4. Assign the scenario pages in the student workbook to complete as a written exercise.

Name: _____ Class: _____

Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test

Select the best answer to the following multiple-choice questions:

1. A DNR is what kind of directive?
 - a. Advance
 - b. Simple
 - c. Verbal
 - d. Competent
2. Which of the following is true about life-sustaining treatment?
 - a. Prolongs life after reversing the underlying medical condition
 - b. Decreases longevity without reversing the underlying medical condition
 - c. Prolongs life while reversing the underlying medical condition
 - d. Prolongs life without reversing the underlying medical condition
3. When a patient chooses physician-assisted suicide, they must be terminal with how long to live?
 - a. Three months or less
 - b. One year or less
 - c. Six months or less
 - d. One month or less
4. Who administers the lethal dose in physician-assisted suicide?
 - a. The physician
 - b. The patient
 - c. A hospice nurse
 - d. A family member
5. Who must sign the DNR order for it to be valid?
 - a. Only the physician
 - b. The patient and a family member
 - c. The patient and physician
 - d. Only the patient

Ethical Issues Involving Lack of Capacity and End-of-Life Care Post-Test – Answer Key

1. A DNR is what kind of directive?
 - a. **Advance**
 - b. Simple
 - c. Verbal
 - d. Competent
2. Which of the following is true about life-sustaining treatment?
 - a. Prolongs life after reversing the underlying medical condition
 - b. Decreases longevity without reversing the underlying medical condition
 - c. Prolongs life while reversing the underlying medical condition
 - d. **Prolongs life without reversing the underlying medical condition**
3. When a patient chooses physician-assisted suicide, they must be terminal with how long to live?
 - a. Three months or less
 - b. One year or less
 - c. **Six months or less**
 - d. One month or less
4. Who administers the lethal dose in physician-assisted suicide?
 - a. The physician
 - b. **The patient**
 - c. A hospice nurse
 - d. A family member
5. Who must sign the DNR order for it to be valid?
 - a. Only the physician
 - b. The patient and a family member
 - c. **The patient and physician**
 - d. Only the patient

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Name: _____ Class: _____

Ethical and Legal Issues in Healthcare

Summative Assessment

1. Which violation is a mandated reporting requirement for healthcare professionals?
 - a. Assault
 - b. Abuse
 - c. Battery
 - d. Libel
2. _____ is a “failure to act correctly or legally when doing your job, often causing injury or loss.”
 - a. Battery
 - b. Slander
 - c. Malpractice
 - d. Assault
3. What should a healthcare professional follow to decrease criminal or civil liability?
 - a. Duty of care
 - b. Standard of care
 - c. Scope of practice
 - d. Duty to respond
4. Which of these is **not** mentioned as one of the patient’s nine basic rights in a healthcare setting?
 - a. Access to medical insurance
 - b. Privacy and confidentiality
 - c. Ask questions
 - d. Conflict of interest
5. Which of these is **not** considered a patient’s responsibility?
 - a. Provide accurate health information
 - b. Be responsible for their health
 - c. Respect others
 - d. Diagnose their illness
6. Patients have rights that stem from the ethical practice of medicine and _____.
 - a. Basic human rights
 - b. Common knowledge
 - c. Moral standards
 - d. Public awareness
7. What does DNR stand for?
 - a. Do not revive
 - b. Do not resuscitate
 - c. Do not resurrect
 - d. Do not revitalize
8. Which of the following is **not** one of the four principles of informed consent?
 - a. The patient has the ability to make the decision
 - b. The patient voluntarily gives consent without coercion
 - c. The patient must be able to comprehend the information
 - d. The insurance company must authorize the treatment
9. What would you expect to see on an informed consent agreement?
 - a. The patient’s birthdate
 - b. Diagnosis of the patient’s condition
 - c. The patient’s medical insurance provider
 - d. Prognosis of the patient’s condition

10. Which of the following is considered a covered entity under the HIPAA Privacy Rule?
 - a. Patients
 - b. Business associates
 - c. Consumers
 - d. Attorneys
11. Those who perform or provide a function, activity, or service for a covered entity are called _____.
 - a. Business associates
 - b. Health plans
 - c. Healthcare clearinghouses
 - d. Healthcare professionals
12. What does e-PHI stand for?
 - a. Electronically permissive health insurance
 - b. Electronic protected health information
 - c. Electronically protected health insurance
 - d. Electronic private health information
13. When can a healthcare professional use a patient's identifying information on social media?
 - a. Never
 - b. When a healthcare professional deems it necessary
 - c. Only with written consent from the patient
 - d. Only with verbal consent from the patient
14. Studies have shown that hospitals, clinics, and healthcare professionals who use social media as a marketing tool are _____ effective.
 - a. Highly
 - b. Somewhat
 - c. Not very
 - d. Rarely
15. Which was **not** mentioned regarding public health programs and social media?
 - a. Global networks
 - b. Mass casualty events
 - c. Donor pledges
 - d. Fundraising
16. Which principle of ethics is closely associated with the Hippocrates saying "*primum non nocere*"?
 - a. Nonmaleficence
 - b. Justice
 - c. Beneficence
 - d. Autonomy
17. What does *primum non nocere* mean?
 - a. Don't harm others
 - b. First, do no harm
 - c. Never do any harm
 - d. First, there is no harm
18. What is another name for situational ethics?
 - a. Contextualism
 - b. Intellectualism
 - c. Humanitarianism
 - d. Interventionism
19. Which type of standards are based on the human principle of right and wrong and without a legal basis?
 - a. Legal standards
 - b. Scope of practice
 - c. Ethical standards
 - d. Immoral standards
20. Ethical issues surrounding disease prevention involves the safety of the _____ health.
 - a. Publics'
 - b. Healthcare professionals'
 - c. Hospital administrators'
 - d. Ethics committees'

21. How is wealth defined as it relates to economic inequality?
- How much a person makes per month
 - How much a person makes per hour
 - How much a person has in possessions or money
 - How much a person makes yearly
22. When was abortion legalized?
- 1973
 - 1950
 - 1967
 - 1945
23. Abortion is a procedure that removes what from the uterus?
- The fetus
 - The embryo
 - The embryo or fetus and placenta
 - The placenta
24. Where is the egg fertilized by the sperm using in vitro fertilization?
- In a test tube
 - In the womb
 - In an incubator
 - In a warm environment
25. What title of the Civil Rights Act requires healthcare employers to protect their employees from harassment and discrimination?
- Title V
 - Title IV
 - Title IX
 - Title VII
26. How is civil defined?
- The act of agreeing with someone so as not to cause an argument
 - The act of being polite and courteous in speech and behavior
 - The act of accepting all cultures
 - The act of respecting a person's decision
27. What **first** needs to be filed for any incident involving harassment?
- A police report
 - A lawsuit
 - An incident report
 - A grievance report
28. Children are not allowed to refuse medical care unless they are ____ by the court.
- Emancipated
 - Rejected
 - Adopted
 - Appealed
29. Which of the following is **not** one of the terms that need to be met for an assisted suicide?
- Voluntary act
 - The patient administers the lethal dose
 - The patient is not terminally ill
 - The patient has six months or less to live
30. What is another term for do not resuscitate?
- No code
 - Full code
 - Code blue
 - Code red

Ethical and Legal Issues in Healthcare Summative Assessment – Answer Key

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