The Identification and Resolution of Ethical Issues in Health Care: Theoretical and Practical Viewpoints

Sherryl Whearry Johnson Ph.D.
Albany State University, sherryl.johnson@asurams.edu

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Sherryl W. Johnson, Ph.D.
Professor, College of Business Management: Healthcare Program

Albany State University
Albany, Georgia
United States of America

Abstract

This paper provides an overview of ethical issues facing the health care industry – along with strategies for resolution. The issues were prioritized using the practical perspectives of twenty-six health professionals, employed in various setting in the health care field. The insight of these professionals was deemed most valuable based on the combination of professional experience and ethical training. The responses of the health professionals were compared with theoretical viewpoints of twenty-four healthcare management students enrolled in ethical / legal issues in health care class. The findings from each group were ranked in individual charts. A final chart was used to compare similarities and differences (variations) in the rankings. Suggested solutions for the ethical challenges were also provided by the health care professionals and the healthcare management students.

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Introduction

The United States health care system has been described as the best in the world.

Reasons for the ranking include: highly trained physicians, eradication of many infectious

diseases and advancements in technology (Conrad, 2005). Even so, the United States health care

system has been plagued by issues related to cost, access and quality – sometimes referred to as

the three-legged stool. Because of these issues, including the issue that an estimated 47 million

people have no health insurance, health care in America is becoming an increasingly important

ethical issue (Hales, 2010). The health issues have not been resolved despite the more than one

trillion dollars spent annually on health care. Health care providers have to make decisions

relative to what care to provide and who to provide care to daily. Thus, ethics are also making

choices that may not always feel good or seem like they are beneficial, but are the "right"

choices to make. They are choices that are examples of "model citizens" and examples of the

golden rule (Curry, 2004).

Ethics relates to how well professionals perform their responsibilities to others both

inside and outside their organizations. It is the application of right and wrong standards

according to a professional code of conduct. A survey done in 1995 examined ethics in mid-

South organizations. Sixty-three percent (63%) of respondents said ethics had deteriorated in the

past 10 years (Business Source Premier, 1999). Organizations are now challenged with

regaining public trust in order to survive in today's demanding environment (Business Source

Premier, 1999). More and more, corporations are beginning to realize that ethics cannot be left

behind when entering into the workplace - but must be used throughout the work day.

Some companies, including health care providers, are attempting to bring codes of ethics into the work place through written policies. Written codes of ethics are adopted in the work place for many reasons. The American Management Association recognizes four reasons to adapt a code of ethics (Business Source Premier, 1999). The reasons are as follows: to define the purpose of the organization, to state moral/ethical principles to guide action, to communicate the purposes of ethics of the company, and to provide an overall guide for independent actions within the framework of the organization's principles.

Ethics makes specific judgments about what is right or wrong, it makes claims about what should be done or what should not be done. In reference to the workplace, ethics makes judgments about care decision, right to life, service delivery, payment of services and general organizational protocol.

Even though the definition and concept of ethics is clear, often times, ethical dilemmas are not. This is especially true in the health care system. Ethical dilemmas require health professionals to choose between two equally opposing unfavorable alternatives. Oftentimes, the ethical dilemmas include circumstances that may be beyond the health professional's span of control, for example legislative decisions, politics and/or organizational policies. Today, issues related to the three-legged stool of cost, access and quality remain controversial relative to equity and fairness.

Thus, this paper provides insight from a vast array of health professionals who received ethical training in their academic programs of study. This knowledge is valuable as the selected health professionals encounter and/or witness ethical dilemmas routinely in practices/organizations.

As a comparison, the opinions of students studying health care management will be compared for similarities with the health care providers. Finally, both the health care providers and the health care management students propose strategies for resolution of the ethical issues.

Theoretical Framework

Ethical principles and theories are foundations or theoretical viewpoints used as a guidance tool in making good decisions (Rainbow, 2002). As a result, one may find that there are numerous theories and principles that emphasize different points of views for sound decision making. However, in order for an ethical theory to be useful, it must be directed toward a common set of goals. These goals could include beneficence, least harm or justice (Rainbow, 2002).

Beneficence is a principle that guides the ethical theory to do what is good. This principle is also related to the principle of utility which states that one should attempt to generate the largest ratio of good over evil possible in the world (Penslar 1995). Likewise, the beneficence principle advocates the greatest amount of good because people tend to benefit from good the most. This principle is closely associated with the utilitarian theory that explains the ability to predict the consequences of an action. For example, a utilitarian would conclude that a choice that yields the greatest benefit to the most people is the choice that is ethically correct (Penslar, 1995).

On the other hand, least harm is a principle that deals with situations in which neither choice is good, but sufficient. In this case, a person should try his or her best to harm the fewest people. One prime example would be the Hippocratic Oath. In this case, a physician is first charged with the responsibility to "do no harm" to the patient since the physician's primary duty is to provide helpful treatment to the patient rather than to inflict more suffering upon the patient

(Rainbow, 2002). In a case where patients are suffering from a terminal illness for which there is no federally approved drug available, a doctor may encourage all of the patients to forgo any treatment. On the other hand, the doctor may encourage some of the patients (only as many as are willing and needed) to participate in a clinical trial for a treatment with risks and some potential benefit. The condition of the patients who participate in the trial may improve. If the patients do not improve, their participation may advance medical science and could be potentially useful to all patients with the terminal condition.

Another principle to consider is justice, which means that ethical theories should prescribe actions that are fair to those involved. In essence, justice would conclude that ethical decisions should be consistent with the ethical theory unless extenuating circumstances that can be justified exist in the case (Penslar 1995).

Ethical principles from the American College of HealthCare Executives Code of Ethics (2006, p.1) which relate specifically to the management of health care are as follows:
The healthcare executive shall:

1. Uphold the *Code of Ethics* and mission of the American College of Healthcare Executives;

2. Conduct all personal and professional activities with honesty, integrity, respect, fairness, and good faith in a manner that will reflect well upon the profession;

3. Comply with all laws and regulations pertaining to healthcare management in the jurisdictions in which the healthcare executive is located or conducts professional activities;

4. Maintain competence and proficiency in healthcare management by implementing a personal program of assessment and continuing professional education;

5. Avoid the exploitation of professional relationships for personal gain;

6. Avoid financial and other conflicts of interest;

7. Use this *Code* to further the interests of the profession and not for selfish reasons;

8. Respect professional confidences;

9. Enhance the dignity and image of the healthcare management profession through positive public information programs; and

10. Refrain from participating in any activity that demeans the credibility and dignity of the healthcare management profession.

In relation to health care delivery, principles such as respect for persons should be considered. Respect for persons is the obligation to protect and preserve the individual autonomy (self determination) of those affected by administrative decisions, and managerial practices, particularly that of patients and staff (Anderson and Glesnes-Anderson, 1987).

In summary, ethical principles are statements of human obligations or duties that are generally accepted and are the expression of ethical systems. In addition to theories, the foundation of values and concepts should be considered thoroughly.

Methodology

Twenty-six health professionals were interviewed in their perspective healthcare settings and asked to provide three ethical dilemmas they felt were important in the delivery of health care. They were also asked to recommend solutions to the dilemmas they provided. The health professionals were selected at random from Georgia hospitals, nursing homes, health departments, clinics, hospices, public health department doctor's offices, pharmacies and assisted living facilities. Practical experience was required to participate in the study. All of the health professionals were in managerial / leadership roles. Their titles included: lead access specialist,

registered nurse, district epidemiologist, medical technologist, administrative coordinator, entrepreneur, social service director, public health director to district public health liaison. Fifty four percent (n = 14) of the health professionals had bachelor's degrees in their fields of study with a few holding the associates degree and the masters degree. One health professional held a Ph.D. Eighty five percent (n=22) of the health professionals were female. Fifteen percent (n=4) of the health professionals were male.

Twenty-four undergraduate healthcare management students - enrolled in an ethical/legal issues in health care course- were also selected to participate in the study. Their theoretical knowledge in health care ethics was a premier requirement for their participation in the study. Fifty percent (n =12) of the students were juniors with 60 – 89 semester hours. Another twenty-five percent (n=6) of the students were seniors with 90 or more hours; and the remaining twenty-five percent were sophomores with 30 to 59 hours. Fifty percent (n=12) of the students indicated prior experience in the health care field ranging from volunteer to employment assignments. Agencies where experience was gained included: hospitals, student health centers, nursing homes, social service health agencies, clinics, public health agencies, and doctors' offices. Eighty three percent (n=20) of the students were female and seventeen percent (n=4) were males.

The ethical issues and strategies provided by the health professionals were placed in a table, as were the ethical issues and strategies provided by the students. The top five ethical issues, along with the accompanying strategies, were selected from the health professional table. Also, the top five ethical issues, along with the accompanying strategies, were also selected from the student table.   The tables were presented separately and then compared for rankings/commonalities.

Analysis

The tabular rankings for health professionals appear in Table 1. The ranking order of health issues was as follows: health care costs/insurance (16); legal issues (10); patients' rights (8); communication issues (5); quality/access issues (3). Please note what these categories included. Health costs/insurance included caring decisions, cost containment, rising costs of health care equipment, budget constraints, Medicare and Medicaid funding shortage, and lack of funds, high cost for prescriptions and inadequate insurance coverage. Legal issues included legal termination/end of life issues, medical lawsuits, governmental health issues, fraud/abuse and treatment /consent for minors. Patients' rights issues included pro-choice vs. pro life, patient confidentiality, patients rights vs. policy, client – resident relationship/patient complaints, and rights to abortions. Communication issues related to language barriers, patient literacy, lack of communication with staff, withholding important information, and illegible handwriting. Quality and access issues related to health disparities in minorities, elimination of health disparities and services related to sexually transmitted diseases in teenagers. Strategies for resolution were also suggested and appear in Table 1.

Table 1:   Top Five Ethical Issues in Health Care from Health Care Professionals

Category	Ethical Issue	Strategies for Resolution
Health Care Costs / Insurance (16)	1. Caring Decisions and Cost Containment 2. Rising Costs of Health Care Equipment 3. Budget Constraints 4. Medicare and Medicaid Funding Shortage 5. Lack of Funds 6. High Cost for Prescriptions 7. Inadequate Insurance Coverage	1. Have supplementary health insurance coverage 2. Seek state and federal grants 3. Acquire more state and federal grant funding 4. States should review and revise Medicare and Medicaid 5. Implement Universal health care and state and federal funding 6. Implement Universal health care system 7. Seek sufficient funds for coverage Restructure health care system Help patients become insured Implement universal health care Increase educational opportunities

Legal Issues (10)	1. Legal / Termination /End of Life Issues	1. Have a legal will and a power of attorney
	2. Medical Lawsuits	2. Place cap on medical lawsuits filed / Have legal will and power of attorney
	3. Governmental Health Issues	3. Restructure laws
	4. Fraud / Abuse	4. Report fraud / abuse funding
	5. Treatment/ Consent for Minors	5. Law Revision / Minors speak with parents
Patients' Rights (8)	1. Pro-Choice vs. Pro Life Issues	1. Always have a legal will and designate a power of attorney
	2. Patient Confidentiality Issues	2. HIPAA Law Incorporation
	3. Patient Rights vs. Policy	3. Consistently of apply policies and procedures
	4. Client – Resident Relationship/ Patient Complaints	4. Hold Workshops and training for staff members / handle complaints efficiently
	5. Right to Abortion	5. Respect Person's Decision
Communication Issues (5)	1. Language Barrier	1. Place more interpreters in the medical field
	2. Patient Literacy	2. Increase educational opportunities
	3. Lack of Communication with Staff	3. Communicate with staff effectively
	4. Withholding Important Information	4. Report adequate information
	5. Illegible Handwriting	5. Promote clear penmanship among health providers
Quality / Access Issues (3)	1. Health Disparities in Minorities	1. Restructuring of health system
	2. Elimination of Health Disparities	2. Promote awareness of health disparities to communities
	3.Sexually Transmitted Diseases Among Teenagers	3. Educate and increase awareness of teenagers about STDs

The tabular ranking for health care management students appear in Table 2. The ranking order of health issues by healthcare management students was as follows: negligence, other legal issues, patients' rights, insurance/cost issues and quality/access issues. Negligence included, malpractice, medical malpractice, prescribing the wrong medication, instruments left in patients, and minor mistakes. Legal issues included fraud and dishonesty. Patient rights were included in patient abuse. Insurance/costs issues included the need for universal health care, aggressive pursuit of unpaid bills, and lack of insurance and insurance awareness. Quality/access issues included health disparities among races and quality and access to health services, prioritization of patients and customer services. Strategies for resolution were also included and appear in Table 2.

Table 2:   Top Five Ethical Issues in Health Care from Students

Category	Ethical Issue	Selected Strategies
Negligence (19)	1. Malpractice	1. Patient education on personal health/healthcare, not leaving it completely up to doctors /Inspections of doctors/utilization of hidden cameras/ Healthcare provider should show license
	2. Medical Malpractice	2. Ensure all healthcare staff is fully informed about job duties / Have less people doing wrongful acts – more inspections
	3. Doctors/nurses prescribing and giving wrong medication	3. Ensuring doctors fully understand the patients symptoms before prescribing medicine and ensure nurses can read prescriptions
	4. Instruments left in patients and whether to tell them or not	4. Use scanner sponges and take x-rays after surgery
	5. Minor mistakes	5. Keep count of everything
2. Legal Issues (18)	1. Fraud	1. Limit information given to doctors / Develop a better fraud policy / Keep track of all medical payments and transactions
	2. Honesty	2. Stop doctors from filing fraudulent claims / Better background checks
3. Patients' Rights (11)	1. Patient Abuse	1. Have camera in all patient's room to monitor staff / Do better background checks / Monitor health care employees more closely and carefully/ Have a group responsible for ensuring the proper care is given to all patients
4. Insurance/Cost Issues (7)	1. Need for Universal Health Care	1. Work with public officials to fund
	2. Aggressive pursuit of unpaid bills	2. Hospital to write off balances
	3. Lack of insurance	3. Form programs for people in those cases
	4. Insurance awareness	4. People should be more aware of insurance policies and what they cover / Cut cost of insurance or make it affordable or continue to bill others
5. Quality/Access Issues (4)	1. Health disparities among races	1. Stop stereotyping among races
	2. Quality and access to health Services	2. More money in communities
	3. Priority of patient	3. All patients should have equal opportunity for care not based on money
	4. Customer service	4. Picture yourself being the patient and treat them how you would want to be treated / Customer service training

When comparing the ranking of ethical issues identified as important by health

professionals and healthcare management students, health care costs/insurance was ranked first

by health professionals/managers, while negligence was ranked first by the students. Legal

issues were ranked second by both the health professionals and the students.

Likewise, patients' rights were ranked third by both groups. Communication was ranked

fourth by the health professionals, while students ranked insurance as fourth. Both health

professionals and students ranked quality and access issues as fifth. (See Table 3).

Table 3: Comparative Rankings of Health Care Professionals and Students

(Note: 1= highest ranking; 5 = lowest ranking)

Ethical Issue Category	Ranking by Health Professionals / Managers	Ranking by Students
Health Care Costs / Insurance	1	4
Negligence	NA	1
Legal Issues *	2	2
Patients Rights*	3	3
Communication Issues	4	NA
Quality / Access Issues*	5	5

*Similar rankings categorical rankings were noted for both health professionals/managers and the students.

Discussion

The commonalities in ranking the important ethical issues by health professionals and

health care students occurred in three of the five categories (legal issues – 2nd; patients' rights –

3rd and quality/access issues – 5th. Categorical rankings that varied included health care

costs/insurance, which was first for health care professionals. Students ranked negligence first.

Health professionals ranked communication issues fourth, while students ranked health care costs/insurance as fourth.

It is likely that the differences were primarily related to the theoretical vs. the practical perspectives. With health professionals dealing directly with ethical issues on a daily basis, they deemed health care costs/insurance as most important. It is likely that they have seen these ethical issues interfere with the acquisition of health care for many.

Students, on the other hand, viewed negligence and malpractice issues as most important. This was likely due to their theoretical viewpoints and the emphasis being placed on appropriate care in the classroom setting. Even so, categorical rankings for legal issues, patients' rights and quality and access issues were ranked similarly by both health professionals and students. This was likely due to the interaction of the ethical principles / theories with the practice of health care. The value of ethical training has long been recognized for health professionals.

Strategies for resolution were more sensible/practical and related directly to the issue presented from the perspective of the health care professionals/managers. For example, for insurance/costs, health professionals identified the rising cost of care and the lack of funds as an issue. In relation to the issue, they suggested that state and federal grants be sought and universal health care be explored. Students, on the other hand, mentioned unpaid bills and lack of insurance as an issue under insurance/costs and suggested that hospitals write off all the balances, that insurance costs be cut and that health professionals work with public offices to fund and form programs for the uninsured. While support from public officials may be sought, it is unlikely that hospitals will be able to survive if they write off all unpaid costs. Also, it is unlikely that insurance cost will suddenly be cut without lengthy political and governmental intervention. The ideas, while sensible, are not practical in their current state. While not

unrealistic, additional energizes and steps in the decision making process would have to be added.

This study highlights the foresight of both health professionals and students in identifying and ranking critical ethical issues in health care. The study also underscores the significance of ethical training and proper application of ethical theories and principles in determining appropriate health practices/needs. Such insight can be used to make great strides in ethical issues currently plaguing the health care industry. Both health care professionals and students could serve as a focus group to provide suggestions to resolve current health issues – using both a practical and theoretical framework.

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