American Nurses Association Code of Ethics and the Ethical and Religious Directives for Catholic Healthcare Services Crosswalk

ANA Code of Ethics for Nurses®	Ethical and Religious Directives for Catholic Health Care Services	Implementation
Provision 1: The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.	In accord with its Mission, Catholic health care should distinguish itself by service to and advocacy for those people whose social condition puts them at the margins of our society and makes them particularly vulnerable to discrimination. (Directive #3) The inherent dignity of the human person must be respected and protected regardless of the nature of the person's health problem or social status. The respect for human dignity extends to all persons who are served by Catholic health care. (Directive #23) In compliance with federal law, Catholic health care institutions will make available to patients information about their rights, under the laws of their state, to make an advance directive for their medical treatment. (Directive #24) The well-being of the whole person must be taken into account in deciding about any therapeutic intervention or use of technology. Therapeutic procedures that are likely to cause harm or undesirable side-effects can be justified only by a proportionate benefit to the patient. (Directive #33) Catholic health care ministry is rooted in a commitment to promote and defend human dignity; this is the foundation of its concern to respect the	OLOL Mission and Core Values OLOL Policies: Confidentiality Nursing Standards for Patient Care Services Standards of Professional Performance Foreign language interpreters Deaf and hearing impaired services Chaplain s Ethics Consult: Dialogue Related to Ethical, Legal and End-of-Life Issues Advance Directives: Living Will / Declaration Concerning Life Sustaining Procedures, Power of Attorney for Health Care Assessment and Reassessment of Patient Care Needs According to Job Class Suspected Abuse or Neglect, Reporting of Child/Adult Palliative Care

	sacredness of every human life from the moment of conception until death. The first right of the human person, the right to life, entails a right to the means for the proper development of life, such as adequate health care. (<i>Normative Principle #1</i>)	
Provision 2: The nurse's primary commitment is to the patient, whether an individual, family, group, or community.	Catholic health care should be marked by a spirit of mutual respect among caregivers that disposes them to deal with those it serves and their families with the compassion of Christ, sensitive to their vulnerability at a time of special need. (<i>Directive #2</i>) The free and informed consent of the person or the person's surrogate is required for medical treatments and procedures, except in an emergency situation when consent cannot be obtained and there is no indication that the patient would refuse consent to the treatment. (<i>Directive #26</i>) Free and informed consent requires that the person or the person's surrogate receive all reasonable information about the essential nature of the proposed treatment and its benefits; its risks, side-effects, consequences, and cost; and any reasonable and morally legitimate alternatives, including no treatment at all. (<i>Directive #27</i>) Each person or the person's surrogate should have access to medical and moral information and counseling so as to be able to form his or her conscience. The free and informed health care decision of the person or the person's surrogate is to be followed so long as it does not contradict Catholic principles.	OLOL Mission and Core Values OLOL Policies: Nursing Standards for Patient Care Services Standards of Nursing Care Standards for Professional Performance Confidentiality Patient Rights, Complaints and Grievances Right to Effective Pain Management

	(Directive #28).	
	The well-being of the whole person	
	must be taken into account in deciding	
	about any therapeutic intervention or	
	use of technology. Therapeutic	
	procedures that are likely to cause harm	
	or undesirable side-effects can be	
	justified only by a proportionate benefit	
	to the patient. (<i>Directive #33</i>)	
	Patients should be kept as free of pain as	
	possible so that they may die	
	comfortably and with dignity. (Directive	
	#61)	
on 3: The nurse	In compliance with federal law, a	Ва
tes, advocates for,	Catholic health care institution will	ΟL
ives to protect the	make available to patients information	
safety, and rights	about their rights, under the laws of	
actions	their state to make an advance directive	•

Provision promote and striv health, s of the patient. their state, to make an advance directive for their medical treatment. The institution, however, will not honor an advance directive that is contrary to Catholic teaching. If the advance directive conflicts with Catholic teaching, an explanation should be provided as to why the directive cannot be honored. (Directive #24)

All persons served by Catholic health care have the right and duty to protect and preserve their bodily and functional integrity. The functional integrity of the person may be sacrificed to maintain the health or life of the person when no other morally permissible means is available. (Directive #29)

No one should be the subject of medical or genetic experimentation, even if it is therapeutic, unless the person or surrogate first has given free and informed consent. In instances of

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LOL Policies:

- **Corporate Compliance**
- **Medication Administration**
- Patient's Right to Opt Out of **Facility Directory**
- Patient Identification
- Confidentiality
- Disclosure of Unanticipated Outcomes, medical Errors and Sentinel Events
- Informed Consent Process for Clinical Research
- Counseling Action System

nontherapeutic experimentation, the surrogate can give this consent only if the experiment entails no significant risk to the person's well-being. Moreover, the greater the person's incompetency and vulnerability, the greater the reasons must be to perform any medical experimentation, especially nontherapeutic. (Directive #31)

Health care providers are to respect each person's privacy and confidentiality regarding information related to the

person's diagnosis, treatment, and care.

(Directive #34)

Provision 4: The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.

A Catholic health care institution must treat its employees respectfully and justly. This responsibility includes: equal employment opportunities for anyone qualified for the task, irrespective of a person's race, sex, age, national origin, or disability; a workplace that promotes employee participation; a work environment that ensures employee safety and well-being; just compensation and benefits; and recognition of the rights of employees to organize and bargain collectively without prejudice to the common good. (*Directive #7*) Employees of a Catholic health care institution must respect and uphold the religious mission of the institution and adhere to these Directives. They should maintain professional standards and promote the institution's commitment to human dignity and the common good. (Directive #9)

Within a pluralistic society, Catholic health care services will encounter requests for medical procedures contrary to the moral teachings of the Church.

OLOL Policies:

- Standards for Professional Performance
- Nursing Standards for Patient Care Services
- Corporate Compliance
- Performance Evaluations
- Nursing Governance Structure
- Patient Care Assignment of Nursing Personnel
- Master Staffing Plan
- Employee Competence Validation

Provision 5: The nurse	Catholic health care does not offend the rights of individual conscience by refusing to provide or permit medical procedures that are judged morally wrong by the teaching authority of the Church. (Normative Principle #5) Employees of a Catholic health care	Clinical Advancement Program
owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.	institution must respect and uphold the religious mission of the institution and adhere to these Directives. They should maintain professional standards and promote the institution's commitment to human dignity and the common good. (<i>Directive #9</i>)	Certification Pay Continuing Education Opportunities OLOL Policies: Tuition Reimbursement Stipends for Nurse Education Ethics and Professional Conduct Conflict of Interest Standards for Professional Performance
Provision 6: The nurse participates in establishing, maintaining, and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.	Catholic health care should be marked by a spirit of mutual respect among caregivers that disposes them to deal with those it serves and their families with the compassion of Christ, sensitive to their vulnerability at a time of special need. (<i>Directive #2</i>) A Catholic health care institution must treat its employees respectfully and justly. This responsibility includes: equal employment opportunities for anyone qualified for the task, irrespective of a person's race, sex, age, national origin, or disability; a workplace that promotes employee participation; a work environment that ensures employee safety and well-being; just compensation and benefits; and recognition of the rights of employees to organize and bargain collectively without prejudice to the common good. (<i>Directive #7</i>)	Collaborative Care OLOL Policies Standards for Professional Performance Principles and Standards for Team Member Behavior Employee Dress and Appearance My Bid Nursing Standards for Patient Care Services Staff Request Not to Participate in a Specific Aspect of Care Nursing Governance Structure
Provision 7: The nurse	A Catholic health care institution,	Membership in Professional

participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.	especially a teaching hospital, will promote medical research consistent with its mission of providing health care and with concern for the responsible stewardship of health care resources. Such medical research must adhere to Catholic moral principles. (<i>Directive #4</i>)	Organizations Certification Pay Clinical Advancement Program OLOL Policies • Standards of Professional Performance • Clinical Research Steering Committee Process
Provision 8: The nurse collaborates with other health professionals and the public in promoting community, national, and international efforts to meet health needs.	A Catholic health care organization should be a responsible steward of the health care resources available to it. Collaboration with other health care providers, in ways that do not compromise Catholic social and moral teaching, can be an effective means of such stewardship. (Directive #6) Catholic health care ministry exercises responsible stewardship of available health care resources. A just health care system will be concerned both with promoting equity of care—to assure that the right of each person to basic health care is respected—and with promoting the good health of all in the community. The responsible stewardship of health care resources can be accomplished best in dialogue with people from all levels of society, in accordance with the principle of subsidiarity and with respect for the moral principles that guide institutions and persons. (Normative Principle #4)	Community Health Parish Nursing Engagement in Community Events (American Heart Walk, Stroke Screening, Life After 50, Men's Health) Clinical Educators Clinical Nurse Specialists
Provision 9: The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the	A Catholic institutional health care service is a community that provides health care to those in need of it. This service must be animated by the Gospel of Jesus Christ and guided by the moral tradition of the Church. (<i>Directive #1</i>) Employees of a Catholic health care institution must respect and uphold the	OLOL Mission and Values Team Councils OLOL Policies Standards of Professional Performance Staff Request Not to Participate in a Specific Aspect of Care

profession and its practice, and for shaping social policy. religious mission of the institution and adhere to these Directives. They should maintain professional standards and promote the institution's commitment to human dignity and the common good. (*Directive #9*)

The biblical mandate to care for the poor requires us to express this in concrete action at all levels of Catholic health care. This mandate prompts us to work to ensure that our country's health care delivery system provides adequate health care for the poor. In Catholic institutions, particular attention should be given to the health care needs of the poor, the uninsured, and the underinsured. (*Normative Principle #2*)

Catholic health care ministry seeks to contribute to the common good. The common good is realized when economic, political and social conditions ensure protection for the fundamental rights of all individuals and enable all to fulfill their common purpose and reach their common goals. (*Normative Principle #3*)

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