



South African Nursing Council

(Under the provisions of the Nursing Act, 2005)

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CODE OF ETHICS FOR NURSING PRACTITIONERS IN SOUTH AFRICA

Excellence in Professionalism and Advocacy for Healthcare Users

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1. PREAMBLE

Ethics is an integral part of the nursing profession and forms the foundation thereof. This Code of Ethics for Nursing in South Africa reminds all Nursing Practitioners of their responsibilities towards individuals, families, groups and communities, namely to protect, promote and restore health, to prevent illness, preserve life and alleviate suffering. These responsibilities will be carried out with the required respect for human rights, which include cultural rights, the right to life, choice and dignity without consideration of age, colour, creed, culture, disability or illness, gender, sexual orientation, nationality, politics, race or social status. The persons in the care of every Nursing Practitioner must be able to trust such Nursing Practitioner with their health and wellbeing.

This Code of Ethics also serves as a declaration by nurses that they will always provide due care to the public and healthcare consumers to the best of their ability while supporting each other in the process. It is premised on the belief that the nursing profession embraces respect for life, human dignity and the rights of other persons.

The Code of Ethics does not only provide guidance to nurses in the process of their ethical decision-making, but is a binding document the content of which must be complied with. While the Code of Ethics provides ethical direction within which a Nursing Practitioner's practice should be framed, it will not provide solutions for day-to-day ethical dilemmas in practice, but the individual nurse practitioner will often need to rely on his/her own personal integrity to make the right decisions.

As the Code is premised on the principles of respect for life, human dignity and the rights of other persons, its application is to be considered in conjunction with all applicable South African laws as well as international policy documents which include, but are not limited to the Universal Declaration of Human Rights, International Council of Nurses (ICN) Code of Ethics, the Patients' Rights Charter and all other nursing and healthcare policy frameworks providing direction and guidance for responsible practice in nursing.

2. PURPOSE STATEMENT

This Code of Ethics is the foundation of ethical decision-making and is aimed at informing Nursing Practitioners and the public of the following ethical and moral principles applicable to Nurse Practitioners in the performance of their duties.

It assists both the practitioners and healthcare users with:

- o identifying ethical values and principles that form the foundation for professional conduct;
- o providing the framework for reflection on the influence of ethical values on the behaviour and interaction between nurses and the public, stakeholders and healthcare users;
- o providing the framework for ethical decision-making for practice;
- o indicating to the public, stakeholders and healthcare users the standards and ethical values they can expect nurses to uphold; and
- o providing guidance to professional conduct or ethical committees regarding decisions relating to unethical behaviour.

As professionals, Nursing Practitioners will be personally accountable for all actions and omissions while carrying out their responsibilities in their profession and must always be able to justify all decisions taken and carried out.

3. ETHICAL PRINCIPLES

Inherent in ethical decision-making is the application of ethical values and principles in difficult and conflicting situations that nurses may face in specific circumstances during the practice of their profession. Nurses are at all times expected to observe and apply fundamental ethical principles in their interaction with healthcare users. Such ethical principles include, but are not limited to the following:

- (Social) Justice – Nurses are at all times expected to act fairly and equitably where there is competition of interest among parties, groups or individuals. Such interests may be, amongst others, related to access of healthcare resources, issues linked to prioritising care or any situation that may be perceived or experienced as unequal. Nurses should therefore pursue justice and advocate on behalf of vulnerable and disadvantaged healthcare users and should be able to justify their decisions and actions.
- Non-maleficence – This requires a nurse to consciously refrain from doing harm of any nature whatsoever to healthcare users, individuals, groups and communities.
- Beneficence – Nurses are required to do good and to choose the “best option” of care under given circumstances and act with kindness at all times. It gives expression to compliance with the “duty to care” as a professional practice imperative.

- Veracity – This principle requires the nurse to act with truthfulness and honesty and to ensure that the information provided to and on behalf of the healthcare user is always in the best interest of the healthcare user.
- Fidelity – This entails adherence to factual and truthful accounting and balancing that with respecting, protecting and maintaining confidential information pertaining to the delivery of healthcare, including health records of healthcare users.
- Altruism – Nurses are at all times expected to show concern for the welfare and wellbeing of healthcare users. The nurses are to be mindful of the fact that wishes and actions of healthcare users may be in conflict with the values and principles of the code, e.g. where healthcare users refuse treatment to the detriment of their health and that of others.
- Autonomy – Respect for the autonomy of eligible persons (healthcare users) to make their own decisions and choices in matters affecting their health.
- Caring – Nurses are required to demonstrate the art of nurturing by both applying professional competencies and positive emotions that will benefit both the nurse and the healthcare user with inner harmony.

These Ethical Principles have to be upheld at all times by all Nursing Practitioners in whatever role they fulfil as direct or indirect patient care providers, including, amongst others, educators, administrators, researchers, policy developers and others, in any setting whatsoever.

4. VALUE STATEMENT

This Code is based on the belief that nurses value:

- o human life;
- o respect, dignity and kindness for oneself and others;
- o the uniqueness of individual healthcare users and also acknowledge the diversity of people in their care;
- o the right to access to quality nursing and healthcare for all;
- o the provision of accurate and truthful information in accordance with informed consent or refusal of treatment to enable individuals to make informed decisions in respect of matters affecting their health;
- o integrity of persons in their care as well as the image of the profession;
- o confidentiality and privacy of personal information and belongings of healthcare users; and

- o a culture of safety and an ethically-friendly environment, which includes the protection of healthcare users from colleagues who may be unfit to practise due to impairment or disability, posing a threat to the health and wellbeing of healthcare users.

5. IMPLEMENTATION

The Code is a formal document published and used by the South African Nursing Council. It is binding upon all Nurse Practitioners of all categories of persons registered under the Act. It is therefore incumbent upon all practitioners to familiarise themselves with the content of the Code of Ethics as it will form the basis for moral and ethical decisions taken, which will have a bearing on their professional conduct towards healthcare consumers. The practitioner therefore has to be mindful of certain dynamics related to the application of the Code, such as interpersonal/intergroup relationships inherent in their professional practice.

Changes in the health practice environment often cause decision-making processes to be challenging and demanding. This will imply that the Code will also have to be reviewed regularly. It is the responsibility of every individual Nursing Practitioner to stay abreast of any changes to this Code.

5.1 RELATIONSHIPS INHERENT IN THE APPLICATION OF THE CODE OF ETHICS

This Code identifies and indicates to all parties the ethical values that are inherent in professional conduct and that form the foundation thereof. It further provides the framework for decision-making in professional practice and for professional interaction between practitioners, the public and healthcare users. Ethical values are integrated in and impact directly on the interaction and the relationships that the nurse has with self and others, including fellow nurses, members of the broader health team and healthcare users. Such interactions and relationships include the following:

5.1.1 Nursing Practitioner in own individual capacity (Self)

Each nurse needs to identify and acknowledge his/her own personal values that form the basis for ethical decision-making, which subsequently informs professional conduct. It is essential that these ethical values are acceptable and not in conflict with the ethical principles and values set by the profession. A nurse practitioner has to be an advocate for those in his/her care and this calls for an ability to work effectively within a multidisciplinary team.

5.1.2 Healthcare Users

Healthcare users refer to persons requiring or receiving healthcare, treatment, advice, information or other health-related services. Practitioners are required to uphold ethical values of the profession when confronted by diverse situations.

5.1.3 Colleagues

Colleagues refer to other nursing practitioners, students, members of an interdisciplinary health team, support staff and employers in the working environment as well as all other individuals who are considered as colleagues. Ethical principles must be applied not only in the interaction between the nurse and healthcare users, but also between the nurse and other colleagues, regardless of hierarchical status, level of knowledge or professional discipline.

5.1.4 Community

Community refers to the South African society as a whole, regardless of geographical location, group affiliation, ethnicity, religious belief, gender, age or sexual orientation. Integral to communities are different values, perceptions, levels of knowledge, beliefs, attitudes and practices. Nurses, amidst diverse cultural and social practices, are required to mitigate harmful cultural practices by communicating and educating communities within the ambits of their competencies, using ethical values as a starting point and foundation upon which to fulfil their duty to care.

5.2 ETHICAL DILEMMAS INHERENT IN THE APPLICATION/IMPLEMENTATION OF THE CODE OF ETHICS

The following is a non-exhaustive list of examples of ethical dilemmas that confront nurses in their work environment and sometimes challenge their own value systems:

- 5.2.1 Termination of pregnancy;
- 5.2.2 trading of products of conception and other human parts;
- 5.2.3 participation in and/or conducting clinical research;
- 5.2.4 providing healthcare and specifically nursing care to vulnerable, stigmatised and marginalised persons;

- 5.2.6 conscientious objection, meaning entitlement to consciously refuse to participate in activities and treatment that nurses believe, on religious or moral grounds, are unacceptable and/or questionable, ethically, morally and legally;
- 5.2.7 situations of conflicting values (diverse cultures, sexual orientation, etc.);
- 5.2.8 conflicts between individual, social and professional values;
- 5.2.9 participating in moonlighting activities and in so doing, compromising the nurse's ability to provide quality care;
- 5.2.10 euthanasia;
- 5.2.11 intimidation and violent acts in the workplace; and
- 5.2.12 participating during strikes and boycotts and in so doing, compromising quality nursing care.

The nature of ethical dilemmas is often complex and controversial.

It may be advisable wherever possible, to make some of the decisions within an ethical committee where diverse values, perceptions and views are taken into consideration by a collective. The more diverse the group in such an ethical committee, the more ethically and morally sound the decision will be. This will be relative to the urgency of the situation requiring the decision-making.

5.3. APPLICATION AND SANCTIONS

Practitioners must refer to the relevant legislative frameworks, standards for practice, competency framework as well as the scope of practice of the profession. The Code is binding upon all practitioners and is enforced by the Professional Conduct Committee which Committee hears matters where unprofessional conduct arises from poor ethical decision-making or the lack of good ethical decision-making. Failure to adhere to the provisions of the Code or violations thereof, attracts the same sanctions as those of non-adherence to the regulations/rules regarding acts and omissions and may bring the Nursing Practitioner's fitness to practice into question and endanger his/her registration to practice.

6. GLOSSARY

Certain words in this Code may have a meaning relevant to the nursing profession and the community in South Africa:

“Nursing Practitioner” means any person registered in terms of Section 31(1) of the Nursing Act, 2005 (Act No. 33 of 2005);

“Professional conduct” means the manner in which a Nursing Practitioner must behave while acting in his/her professional capacity;

“South African Nursing Council (SANC)” means the statutory body that regulates the profession of nursing in South Africa in terms of the Nursing Act, 2005; and

“Unprofessional conduct” means conduct which, with regard to the profession of a practitioner, is improper, dishonourable, disgraceful or unworthy.

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