

NURS FPX 4000 Assessment 3

Applying Ethical Principles

Healthcare ethics urges the requirement of mastering ethical pitfalls that can merely be achieved if they have a ground of thorough-going ethical principles [that are] used as a primary tool to produce the decision. The process is superficial and follows onto a case study of Dr. Clark and Mr. Patel. The obstacles they face with language, cultural competence, and the ethics of the cure are imaged in the case. A formula of communication strategies, a model of ethical decision-making, and a solution based on moral norms are the principal aims of this bulletin, with the objective of displaying the numerous natures of ethical health care.

Assessment of Case Study Facts with Peer-Reviewed Journal Articles

Cultural Competence and Effective Communication:

Cultural sensitivity is an essential consideration in the process of meeting the needs of a diverse client group, as shown in the literature by (Brooks et al., 2019). Communication strategies that are adapted to different medical cultures and surroundings and that are understood by patients are favorable for creating a mutual understanding and trust between specialists and patients. Dr. Clark's attempt to bridge the cultural gap by supplementing his appointments with translations, allowances for time, and cultural consideration are helpful strategies noted in migrant and refugee healthcare literature. With the help of the science of language translation and cultural sensitivity, Dr. Clark is showing the degree of her attention to a patient-centered approach.

Ethical Principles and Patient Autonomy:

Seeking autonomy and beneficence as ethical principles, Dr. Clark is founded while offering the compelling of the scenario. (Varkey, 2020) study underscores the central role of respect for the autonomy of patients during clinical practice while also highlighting the necessity of creating the best possible benefit for these patients. The doctor responsible for Mr. Patel's surgery, the one who ensures his understanding of the procedure matches the ethical code of patient autonomy, does well. So, this authoritative evidence illuminates the moral basis of the physician's attitude and the overall guideline for the individual-centered method.

Effectiveness of Communication Approaches

Utilization of Verbal and Visual Aids:

Dr. Clark uses oral instruction and also visual images to help Mr. Patel understand the surgical procedure on her. Oral communication, although necessary for passing the rearing to patients with the primary English language, only prudent visual aids are more suitable to increase comprehension.

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As per the publication (Mehra & Mishra, 2021), the merging of multiple types of communication can help in efforts to improve patient knowledge and, in turn, patient satisfaction. That is why Dr. Clark's application of these tools to assist in better communication with patients is notable and should continue to yield more favorable outcomes.

Interpreter Services and Cultural Sensitivity:

By depicting the events where the services of interpreters would be engaged, the case study demonstrates the conversations that Dr. Clark had with Mr. Patel. Nevertheless, dual issues arise, which include recruiting competent interpreters and overcoming related difficulties of medical specialty terminology. The effectiveness level can be improved only when such an arbiter seems like a professional interpreter who can speak Gujarati fluently. The cultural sensitivity training of interpreters and the healthcare staff is desirable since it would help in overcoming culture-bound language barriers and would be more effective in the communication process (Krampe et al., 2022). Being culturally aware when interpreting healthcare can build trust and good relationships between healthcare providers and patients from different cultural backgrounds.

Avoidance of Assumptions and Simplification:

Dr. Clark's insistence on nods and smiles solely from Mr. Patel in their consultations as a measure of trust is a problem for her undivided reason. One of the most common areas for improvement of a web-based medical consultation is the desire to make an assumption rather than a confirmation of comprehension, which can result in a misunderstanding and compromise the quality of informed consent. Instead of focusing on delivering information alone, healthcare providers ought to adopt a patient-based approach that does not shy away from evaluating the degree of understanding and also squarely takes care of any uncertainties. In the case of complicated medical terminology, simple language is one more tool for an increased level of

patient comprehension (Gotlieb et al., 2022). Avoiding any misunderstandings comes from the avoidance of assumptions and opting for a clear communication style to foster a collaborative and shared decision-making attitude.

Using the Ethical Decision-Making Model to Analyze the Case Study

Alignment with Ethical Decision-Making Model:

In Dr. Clark's case study, the strategy used for ethical decision-making followed patient autonomy and beneficence. The ethical distress generated by the disclosure of requirements of informed consent and cultural competence speaks about her moral clarity, and her efforts demonstrate moral judgment by making Mr. Patel aware. Dr. Clark exemplifies ethical behavior in the healthcare setting in her attempt to overcome language and cultural barriers using appropriate communication strategies to provide patient-focused care.

Consequences of Effective Approach:

An effective strategy adopted by Dr. Clark increases patient trust and strengthens communication; it also encourages individuals' participation, and the whole process becomes patient-centric. By emphasizing the way patients explain the case and contribute to the process of making decisions, Dr. Clark reinforces the quality of the relationship between the patient and the doctor and conducts ethical principles. On top of that, she deals with legal and language problems, and by so doing, she lowers the possibility of misinterpretations and any adverse outcomes that may be caused by not having consent signed by the patient.

Consequences of Noneffective Approach:

We need a practical approach marked with insufficient communication and a non-sensitive attitude towards cultural diversity that may lead to adverse outcomes. This could result in cases of misunderstandings, dependence, and loss of self-decision among patients, as well as in the lack of faith in medical centers. The case of neglecting language barriers and cultural differences could be grim in the case of not considering them, which can cause wrong health outcomes and ethical misconduct. Tacitly, methodologies other than client-oriented ones are detrimental, breaking the moral foundation of medical services.

Applying Ethical Principles to Solve Proposed Problem

Cultural Competence and Patient Autonomy:

While the language and cultural service cover of healthcare staff may be a resolution to this ethical problem, training them in these fields seems essential. This model bears in line with moral criteria as well as values such as support for patient self-determination and cultural adaptation. By implementing language-concordant care and personalized communication, healthcare professionals not only maintain the principle of autonomy but also ensure that individuals like Mr. Patel have the necessary information and disease knowledge. Patients will be able to make an informed choice of what they prefer for their health while accessing quality health care even when their linguistic or cultural background won't pose an issue.

Equitable Healthcare Delivery:

The plan at hand contributes through the provision of minimal systemic barriers to communication and understanding, which in turn leads to equitable healthcare delivery. Healthcare ethics entails rendering care fairly and equitably to all patients despite the diversity of people's language or ethnic backgrounds. Healthcare stakeholders advance the cause of equity and justice by allocating linguistic services as well as cultural competence training. It is the one that addresses the unique customers' requirements and attempts to equalize the gaps in health care.

Enhanced Patient-Provider Relationship:

The suggested solution provides patients and healthcare providers with a platform to trust and maintain a relationship. Through their linguistic and cultural sensitivity, medical practitioners indicate their patients' differences and thus the honor they deserve. Through this empathy, a trusting relationship is established, and the patient's satisfaction increases. Ethical healthcare instituted in daily practice ensures communication in interactions based on trust and mutual respect between patient and healthcare provider. The proposed solution not only offers an immediate solution to the ethical conflict but is also part of the broader ethical culture within service delivery.

Conclusion

Ethically respecting healthcare necessitates a multidisciplinary strategy that includes cultural proficiency, proficient communication, and autonomy in respecting the patient. The case study gives us the opportunity to explore the topic and then apply ethical principles. The evidence shows that it is crucial to deal with language barriers and cultural differences in order to provide minimal discrimination for healthcare delivery. The essence of an ethical healthcare

professional is ensuring that the patient is well-conscious and involved in decision-making. In this way, the provider is practicing the principle of patient-centered care, which boosts the trust levels of the patient and augments the doctor-patient relationship.

References

Aelbrecht, K., Hanssens, L., Detollenaere, J., Willems, S., Deveugele, M., & Pype, P. (2019). Determinants of physician–patient communication: The role of language, education, and ethnicity. *Patient Education and Counseling*, 102(4), 776–781.

<https://doi.org/10.1016/j.pec.2018.11.006>

Brooks, L. A., Manias, E., & Bloomer, M. J. (2019). Culturally sensitive communication in healthcare: A concept analysis. *Collegian*, 26(3), 383–391.

<https://doi.org/10.1016/j.colegn.2018.09.007>

Gotlieb, R., Praska, C., Hendrickson, M. A., Marmet, J., Charpentier, V., Hause, E., Allen, K. A., Lunos, S., & Pitt, M. B. (2022). Accuracy in patient understanding of common medical phrases. *JAMA Network Open*, 5(11).

<https://doi.org/10.1001/jamanetworkopen.2022.42972>

Krampe, F., Fabry, G., & Langer, T. (2022). Overcoming language barriers, enhancing collaboration with interpreters – an interprofessional learning intervention (interpret2improve). *BMC Medical Education*, 22(1).

<https://doi.org/10.1186/s12909-022-03213-0>

Mehra, P., & Mishra, A. (2021). Role of communication, influence, and satisfaction in patient recommendations of a physician. *Vikalpa: The Journal for Decision Makers*, 46(2), 99–111.

<https://doi.org/10.1177/02560909211027090>

Varkey, B. (2020). Principles of clinical ethics and their application to practice. *Medical Principles and Practice*, 30(1), 17–28.

<https://doi.org/10.1159/000509119>