



State-Approved Curriculum NURSE AIDE I TRAINING PROGRAM

July 2013
Module E



North Carolina Department of Health and Human Services
Division of Health Service Regulation
Health Care Personnel Registry Section
Center for Aide Regulation and Education
NC DHHS is an equal opportunity provider and employer.

Module E – Law and Ethics Teaching Guide

Objectives

- Describe ethical conduct.
- Describe a resident's rights in the nursing home.
- Give examples of abuse, neglect, and misappropriation of property.
- Explain the role of the Health Care Personnel Registry.
- Explain the role of the nurse aide in securing informed consent prior to providing care to the resident.

Handouts – Duplicate one copy each per student.

- **#1E Mistreatment of the Vulnerable Adult**

Advance Preparation – In General

- Review curriculum and presentation materials
- Add examples or comments to Notes Section
- Set up computer/projector
- Establish internet connection

Advance Preparation – Teaching Tips

- **#2E Web site:** Review the following website: NC Division of Health Service Regulation www.ncnar.org
 - Health Care Personnel Investigations – located at tab by the same name, scroll down and point out the following:
 - Reportable Allegations and Types
 - How to Report Allegations (click and scroll down through the process)
- **#5E Resident's Rights:** Either locate, duplicate, and distribute a copy of the Resident's Rights to each student, or point out the Resident's Rights' document when in clinical.

Module E – Laws and Ethics
Definition List

Abuse – willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain, or mental anguish

Assault – act of threatening to touch, or attempting to touch a person, without proper consent

Basic Human Rights – are protected by the Constitution of the United States and state that a person has the right to be treated with respect, live in dignity, pursue a meaningful life and be free of fear

Battery – touching a person without consent

Civil Law – law that deals with relationships between people

Code of Ethics – rules of conduct for particular group, may differ from one facility to another, but revolves around idea that resident is valuable person who deserves ethical care

Confidentiality – not disclosing or telling information that is personal or private about a resident, except to authorized people

Consent – the right to decide what will be done to the body and who can touch the body, may be written consent, verbal consent, or implied consent

Criminal Law – offenses against the public and society

Defamation – false statement made to a third person that causes a person shame or ridicule, or ruins their reputation; written is called libel; verbal is called slander

Disclosure – making known to the public

Diversion of Drugs – unauthorized taking or use of any drug

False Imprisonment – unlawful restraining or restricting a person's movement

Fraud – an intentional deception or misrepresentation made by a person with knowledge that deception could result in some unauthorized benefit to self or some other person

Invasion of Privacy – violation of right to control personal information or the right to be left alone

Laws – rules made by government to help protect public

Malpractice – giving care for which you are not allowed legally to perform

Misappropriation of Property – illegal or improper use of resident's money, property, assets; by another, without consent, for personal gain

Neglect – a failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness

Negligence – actions or failure to act or give proper care resulting in injury

Nondisclosure – not making known to the public

Privacy – the personal responsibility and activities done to prevent the intrusion of one person onto another

Resident's Rights – rights that have been written into Federal law (OBRA) that identify how a resident must be treated while living in a long-term care facility

Vulnerable Adults – adults who are at risk for abuse or mistreatment because they are not able to protect selves from harm due to mental, emotional, developmental disability; or brain damage; or changes from aging

Module E – Laws and Ethics	
(S-1) Title Slide (S-2) Objectives <ol style="list-style-type: none"> 1. Describe ethical conduct. 2. Describe a resident's rights in the nursing home. 3. Give examples of abuse, neglect, and misappropriation of property. 4. Explain the role of the Health Care Personnel Registry. 5. Explain the role of the nurse aide in securing informed consent prior to providing care to the resident. 	
Content	Notes
(S-3) Laws <ul style="list-style-type: none"> • Are rules made by government to help protect public • Person liable if laws not obeyed and may be fined or jailed • Two types <ul style="list-style-type: none"> ○ Criminal – offenses against the public ○ Civil – deal with relationships between people 	
(S-4) Legal – Key Terms <ul style="list-style-type: none"> • Tort – a wrong committed against a person or property <ul style="list-style-type: none"> ○ Unintentional – did not mean to cause harm ○ Intentional – did mean to cause harm • Malpractice <ul style="list-style-type: none"> ○ Giving care for which you are not allowed legally to perform ○ Example – nurse aide performing treatment only allowed by nurses, such as starting a blood transfusion • Negligence <ul style="list-style-type: none"> ○ Actions or failure to act or give proper care, resulting in injury ○ Examples – brakes on wheelchair not locked and resident falls, failure to provide water if permitted and resident requests 	
(S-5) Assault and Battery <ul style="list-style-type: none"> • Assault <ul style="list-style-type: none"> ○ Act of threatening to touch, or attempting to touch a person, without proper consent (key is consent) ○ Example – threatening to “tie a resident down” • Battery <ul style="list-style-type: none"> ○ Touching a person without consent ○ Example – hitting a resident ○ Example – performing a procedure that resident refused 	
(S-6) Consent <ul style="list-style-type: none"> • The right to decide what will be done to the body and who can touch the body • Example of written consent – signs a form (nurse aide does not obtain this) • Example of verbal consent – a verbal “yes” or “ok” (nurse aide can obtain this) 	

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<ul style="list-style-type: none"> • Example of implied consent – resident extends arm after nurse aide asks to check blood pressure (nurse aide can obtain this) 	
(S-7) Invasion of Privacy <ul style="list-style-type: none"> • Violation of right to control personal information or the right to be left alone • Example – gossiping in the hall about a resident’s medical condition and others hear the conversation • Example – picture taken of resident and put on a social network, without consent 	
(S-8) Legal – Key Terms <ul style="list-style-type: none"> • False imprisonment <ul style="list-style-type: none"> ○ Unlawful restraining or restricting a person’s movement ○ Example – restraining a person, without authorization or justification ○ Example – not allowing a person to leave a facility • Defamation <ul style="list-style-type: none"> ○ False statement made to a third person that causes a person shame or ridicule, or ruins the reputation ○ Written is libel ○ Verbal is slander ○ Example – saying or writing that a resident is insane 	
(S-9) Legal – Key Terms <ul style="list-style-type: none"> • Diversion of drugs – unauthorized taking or use of any drug • Fraud – an intentional deception or misrepresentation made by a person with knowledge that deception could result in some unauthorized benefit to self or some other person 	
(S-10) Importance of Laws <ul style="list-style-type: none"> • Laws tell people what they can and cannot do • Laws are written to protect the public and society from harm 	
(S-11) Legal – Nurse Aide’s Role <ul style="list-style-type: none"> • Understand range of function and know what he/she can legally perform, while on duty • Keep skills and knowledge current • Keep resident’s safety and well-being in mind • Understand directions for use when using equipment, materials, supplies • Follow long-term care facility’s policy and procedures, regarding care of resident • Do no harm to resident or belongings • Report questionable practices by others to the nurse • Review legal key terms and understand examples of each 	

Module E – Laws and Ethics	
<p>HANDOUT #1E: Mistreatment of the Vulnerable Adult</p> <p>Distribute handout to class.</p> <p>TEACHING TIP #1E: Mistreatment of the Vulnerable Adult Handout Begins</p> <p>Refer to the Mistreatment of the Vulnerable Adult Handout and for the next seven (7) slides point out each particular part in the handout depicted on each slide and go over with students.</p>	
<p>(S-12) Who are Vulnerable Adults?</p> <ul style="list-style-type: none"> Adults who are at risk for abuse or mistreatment because they are not able to protect selves from harm due to mental, emotional, developmental disability; or brain damage; or changes from aging 	
<p>(S-13) From What Must we Protect our Vulnerable Adults?</p> <ul style="list-style-type: none"> Neglect – a failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness Misappropriation of property – illegal or improper use of resident’s money, property, assets; by another, without consent, for personal gain Abuse – willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain, or mental anguish 	
<p>(S-14) Role of the Nurse Aide in Regards to Prevention of the Mistreatment of Vulnerable Adult</p> <ul style="list-style-type: none"> Care of personal property <ul style="list-style-type: none"> Handle possessions carefully Report observed theft Add any new possessions to list of resident belongings, per facility policy Mark items with resident’s name Do not accept tips or ask for tips Review key terms and understand what must be reported to nurse Recognize signs/symptoms of various types of abuse, neglect, and misappropriation of funds If abuse is observed by another health care provider, stop abuse and report immediately to nurse Report questionable practices by others to nurse 	
TEACHING TIP #2E: Role-play	

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Role-play a situation between a nurse aide and a resident where a tip is offered for a service.	
(S-15) Signs, Symptoms, and Examples of Neglect <ul style="list-style-type: none"> Dehydration, malnutrition, untreated pressure ulcers, and poor personal hygiene Unsanitary and unclean conditions, such as being dirty, having to lie in feces or urine, inadequate clothing Resident's report of neglect 	
(S-16) Personal Property or Financial Abuse/Misappropriation of Property <ul style="list-style-type: none"> Signs and Symptoms <ul style="list-style-type: none"> The sudden appearance of a staff member's name on a bank signature card The discovery of a forged version of the resident's name The sudden and unauthorized withdrawal of money using an ATM card or other means Unexplained disappearance of the resident's personal property or money from the resident's room Resident's report of missing personal property, assets, or money Examples <ul style="list-style-type: none"> Cashing a resident's checks without permission Forging a resident's name on documents Misusing or stealing a resident's money or personal property 	
(S-17) Physical Abuse <ul style="list-style-type: none"> Signs and Symptoms <ul style="list-style-type: none"> Sprains, dislocations, broken bones, skull fractures Bruises of face, upper arms, upper thighs, abdomen Fearfulness Withdrawn, paranoid behavior Bruises, black eyes, welts, lacerations Rope marks, restraint marks Open wounds, cuts, punctures Internal injuries/bleeding Repeated "unexplained" injuries Sudden change in resident's behavior Resident's report of physical abuse Examples <ul style="list-style-type: none"> Hitting, beating, pushing, kicking, slapping, pinching, shaking Burning Handling or moving the resident roughly Withholding personal or medical care 	

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<ul style="list-style-type: none"> ○ Inappropriate use of drugs and physical restraints ○ Force-feeding 	
<p>(S-18) Emotional or Psychological Abuse</p> <ul style="list-style-type: none"> • Signs and Symptoms <ul style="list-style-type: none"> ○ Emotionally upset or agitated ○ Extremely withdrawn, will not talk, or is non-responsive ○ Deferent, passive, acting shamed ○ Depressed, voices feelings of helplessness and hopelessness ○ Trembling, clinging, cowering, minimal eye contact ○ Unusual behavior (sucking, biting, rocking) that may be mistakenly attributed to dementia ○ Resident’s report of emotional or psychological abuse • Examples <ul style="list-style-type: none"> ○ Instilling fear through intimidation ○ Not answering call signal ○ Mocking or making mean remarks to resident ○ Sexual harassment ○ Demands to perform demeaning acts ○ Verbal threats of harm, insults, threats ○ Humiliation ○ Harassment ○ Treating resident like a baby ○ Enforced social isolation 	
<p>TEACHING TIP #3E: Mistreatment of the Vulnerable Adult Handout Ends</p> <p>The use of Mistreatment of the Vulnerable Adult Handout ends.</p>	
<p>(S-19) Health Care Personnel Registry (HCPR)</p> <ul style="list-style-type: none"> • Lists pending allegations and substantiated findings of nurse aides • HCPR listings can lead to negative consequences for the nurse aide • Nurse aides cannot be employed in a nursing home with a substantiated finding on the HCPR • Substantiated finding of abuse, neglect and misappropriation of resident property will cause a finding on the HCPR 	
<p>TEACHING TIP #4E: Web site</p> <p>Remind the student about the Health Care Personnel Investigations’ web page located at the www.ncnar.org Web site:</p> <p>You may want to navigate back to the Web site as a review</p> <ul style="list-style-type: none"> • Reportable Allegations and Types 	

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<ul style="list-style-type: none"> How to Report Allegations (click and scroll down through the process) 	
(S-20) Mistreatment of Vulnerable Adult – Points to Remember <ul style="list-style-type: none"> Abuse is cause for immediate dismissal of the perpetrator and posted on Nurse Aide Registry, if substantiated Not reporting abuse is aiding and abetting 	
(S-21) Ethics and Code of Ethics <ul style="list-style-type: none"> Ethics <ul style="list-style-type: none"> Is knowledge of what is right conduct and wrong conduct, or knowing right from wrong Inner knowledge that assists us in making choices or judgments Code of Ethics <ul style="list-style-type: none"> Rules of conduct for particular group May differ from one facility to another, but revolves around idea that resident is valuable person who deserves ethical care Helps employees deal with issues of right and wrong Confidentiality – not disclosing or telling information that is personal or private about a resident, except to authorized people Privacy <ul style="list-style-type: none"> The personal responsibility and activities that prevent the intrusion of one person onto another Example – pulling suspended curtains completely around a resident’s bed during care provides physical barrier, from others Example – lowering one’s voice when talking in the hall about a resident’s condition 	
TEACHING TIP #5E: Resident’s Rights Either locate, duplicate, and distribute a copy of the Resident’s Rights to each student or point out the Resident’s Rights’ document when in clinical.	
(S-22) Basic Human Rights <ul style="list-style-type: none"> Are protected by the Constitution of the United States Right to be treated with respect, live in dignity, pursue a meaningful life and be free of fear Examples of infringement of these rights – addressing residents as children, using demeaning nicknames for residents, leaving door open during bath, threatening a resident with harm 	
(S-23) Resident’s Rights <ul style="list-style-type: none"> Defined 	

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<ul style="list-style-type: none"> ○ Residents not only have same legal rights as all citizens of the United States, plus legally protected Resident's Rights ○ Rights that have been written into Federal law (OBRA) that identify how a resident must be treated while living in a long-term care facility ○ Provides a code of ethics for health care providers ○ Posted in long-term care facility and given to resident/legal representative on admission • Ombudsman – every resident living in a North Carolina long-term care center has access to a person assigned to their district, who supports or promotes their interests 	
(S-24) Ethics –Importance <ul style="list-style-type: none"> • Knowledge of right and wrong guides sense of duty and conduct of all health care providers • Guides all health care providers in providing quality care • Governs actions of health care providers • Vital to safety and well-being of residents 	
(S-25) Ethics – Nurse Aide's Role <ul style="list-style-type: none"> • Use good judgment • Keep staff and resident information confidential • Document accurately • Follow plan of care as outlined • Be honest and trustworthy at all times • Report abuse or suspected abuse • Understand and respect Resident's Rights 	
(S-26) Ethics – Nurse Aide's Role <ul style="list-style-type: none"> • Report all resident observations and incidents • Show empathy for residents • Respect all residents equally • Provide high quality of resident care • Protect residents' privacy • Treat all residents professionally • Avoid stereotyping due to residents beliefs or culture • Respect values and beliefs that differ from your own • Safeguard the resident's property 	
(S-27) Ethics – Points to Remember <ul style="list-style-type: none"> • Ethical behavior – always being accountable for actions • When do nurse aides use ethical behavior? Always! • Ethical behavior can vary with different cultures and social backgrounds • We are all individuals who think differently 	

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(S-28) Ethics – Points to Remember <ul style="list-style-type: none"> • End of life decision making usually follow resident’s individual ethical principles • Nurse aides must respect fact that resident has right to make own self-determination regarding end of life decisions and may differ from nurse aide’s own personal ethics • Resident has <ul style="list-style-type: none"> ○ Right to refuse medical intervention at end of life ○ Right to request everything possible in order to prolong life 	
(S-29) THE END	

Handout #1E: Mistreatment of the Vulnerable Adult

Who Are Vulnerable Adults?

Adults who are at risk for abuse or mistreatment because they are not able to protect selves from harm due to mental, emotional, developmental disability; or brain damage; or changes from aging

From What Must We Protect Them?

- Abuse – willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain, or mental anguish
- Neglect – a failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness
- Misappropriation of property – illegal or improper use of resident's money, property, assets; by another, without consent, for personal gain

What is the Role of the Nurse Aide in Regards to Prevention of the Mistreatment of Vulnerable Adult?

- Personal property
 - Handle possessions carefully
 - Report observed theft
 - Add any new possessions to list of resident belongings, per facility policy
 - Mark items with resident's name
 - Do not accept tips or ask for tips
- Report questionable practices by others to nurse
- If abuse is observed by another health care provider, stop abuse and report immediately to nurse
- Review key terms and understand what must be reported to nurse
- Recognize signs/symptoms of various types of abuse, neglect, and misappropriation of funds

Signs, Symptoms, and Examples of Neglect

- Dehydration, malnutrition, untreated pressure ulcers, and poor personal hygiene
- Unsanitary and unclean conditions, such as being dirty, having to lie in feces or urine, inadequate clothing
- Resident's report of neglect

Chart of Abuse

Personal Property or Financial Abuse/Misappropriation of Property	
Signs/Symptoms	Examples
<ul style="list-style-type: none"> • The sudden appearance of a staff member's name on a bank signature card • The discovery of a forged version of the resident's name • The sudden and unauthorized withdrawal of money using an ATM card or other means • Unexplained disappearance of the resident's personal property or money from the resident's room • Resident's report of missing personal property, assets, or money 	<ul style="list-style-type: none"> • Cashing a resident's checks without permission • Forging a resident's name on documents • Misusing or stealing a resident's money or personal property
Physical Abuse	
Signs/Symptoms	Examples
<ul style="list-style-type: none"> • Repeated "unexplained" injuries • Internal injuries/bleeding • Sprains, dislocations, broken bones, skull fractures • Bruises of face, upper arms, upper thighs, abdomen • Black eyes, welts, lacerations • Rope marks, restraint marks • Open wounds, cuts, punctures • Sudden change in resident's behavior • Fearfulness, withdrawn, paranoid behavior • Resident's report of physical abuse 	<ul style="list-style-type: none"> • Hitting, beating, pushing, kicking, slapping, pinching, shaking • Burning • Handling or moving the resident roughly • Withholding personal or medical care • Inappropriate use of drugs and physical restraints • Force-feeding
Emotional or Psychological Abuse	
Signs/Symptoms	Examples
<ul style="list-style-type: none"> • Emotionally upset or agitated • Extremely withdrawn, will not talk, or is non-responsive • Deferent, passive, acting shamed • Depressed, voices feelings of helplessness and hopelessness • Trembling, clinging, cowering, minimal eye contact • Unusual behavior (sucking, biting, rocking) that may be mistakenly attributed to dementia • Resident's report of emotional or psychological abuse 	<ul style="list-style-type: none"> • Instilling fear through intimidation • Not answering call signal • Mocking or making mean remarks to resident • Sexual harassment • Demands to perform demeaning acts • Verbal threats of harm, insults, threats • Humiliation • Harassment • Treating resident like a baby • Enforced social isolation