My Experience

Gifts
Conflicts of Interest
Travel
Use of Resources
Appearances
Information
Ethical Codes
Ethical Codes

ACHE Code of Ethics*
*As amended by the Board of Governors on November 14, 2011.

Preamble
The Healthcare Executive's Responsibilities to the Profession of Healthcare Management
The Healthcare Executive's Responsibilities to Patients or Others Served
The Healthcare Executive's Responsibilities to the Organization
The Healthcare Executive's Responsibilities to Employees
The Healthcare Executive's Responsibilities to Community and Society
The Healthcare Executive's Responsibility to Report Violations of the Code
Additional Resources
Ethical Codes

Principles of the Ethical Practice of Public Health

1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.

2. Public health should achieve community health in a way that respects the rights of individuals in the community.

3. Public health policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.

4. Public health should advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.

5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.

6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community’s consent for their implementation.

7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.

8. Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.

9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.

10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.

11. Public health institutions should ensure the professional competence of their employees.

12. Public health institutions and their employees should engage in collaborations and affiliations in ways that build the public’s trust and the institution’s effectiveness.
Biomedical Ethical Principles

**Autonomy** (a norm of respecting the decision making capacities of autonomous persons.)

**Nonmaleficence** (a norm of avoiding the causation of harm.)

**Beneficence** (a group of norms for providing benefits and balancing benefits against risks and costs.)

**Justice** (a group of norms for distributing benefits, risks, and costs fairly - treating similar cases similarly.)
## BIOETHICS SMART CARD

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<thead>
<tr>
<th>Autonomy</th>
<th>Non-Maleficence</th>
<th>Beneficence</th>
<th>Justice</th>
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<tr>
<td>Self Rule</td>
<td>Do No Harm</td>
<td>Act In Best Interest Of The Patient</td>
<td>To Each Their Due</td>
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<td>Must Have Liberty And Agency</td>
<td>Prevent Unnecessary Harm</td>
<td>The Balance Between Benefit And Harm</td>
<td>Principles To Measure Justice</td>
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<td>Questions To Ask:</td>
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<td>Was/Did The Decision:</td>
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<td>- Intentionally Made</td>
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<td>- Made With Understanding</td>
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<td>- Free From Controlling Influences</td>
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<td>- Demonstrates Capacity</td>
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## The Difference Between Ethics And Morality

Ethics Is Concerned With RIGHT And WRONG.

Morality Is Concerned With GOOD And EVIL.

Ethics Is What We Ought To Do; Morality Is What We Choose To Do.

## Questions To Ask

What Is The Issue?

Who Is Affected?

Consider:
- Patients View
- Physicians View
- Other Stakeholders (I.E. Family, The Community, Etc)

## Army Baylor Ethical Decision-Making Models

**Clinical Model**

1. Frame The Question.
2. Set Out The Medical Situation.
3. Note The Contextual Situation, Including:
   - Stakeholder Social Factors
   - Stakeholder Economic Factors
   - Stakeholder Familial Factors
   - Stakeholder Religious Factors
   - Legal Issues And Precedents
   - Ethical Issues And Precedents
4. Revisit/Reframe The Initial Question.
5. Apply Principles/Identify Conflicts.
6. Identify And Weigh Alternatives.
7. Decide

**Organizational Model**

1. Frame The Question.
2. Set Out The Organizational Situation.
3. Note The Contextual Factors.
4. Revisit/Reframe The Initial Question.
5. Ask Appropriate Questions Such As:
   - Do I Have Accurate Information?
   - Is This Action Transparent?
   - What Are The Views Of Others?
   - Will This Result In Harm To Others?
   - What Are The Political Impacts?
   - Are There Exceptions?
   - What Would My Grandmother Say About This?
   - What Will Result From This Choice?
6. Identify And Weigh Alternatives.
7. Decide
Disney Values

1. Honesty  We deal with each other in a sincere and straightforward manner.

2. Integrity  We act in a manner consistent with our words and beliefs.

3. Respect  We treat each other with care and consideration.

4. Courage  We pursue our beliefs with strengths and perseverance.

5. Openness  We share information freely.

6. Diversity  We seek, value, and respect differences among our fellow Cast Members.

7. Balance  We strive for stability and vitality in our personal and professional lives.

When values are clear, decisions are easy:
Roy Disney
Your Experience...???

http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_024277.hcsp?dDocName=bok1_024277
Mary, a 20-year veteran of the HIM department began her career as a nightshift file clerk when an innovative tertiary care center built a sister facility in her community. She has long been a strong supporter of the facility where she works, sharing her enthusiasm with friends and family by telling remarkable stories about her experiences, promotions within the department, and even about some notable patients. Recently promoted to supervisor over the EMR coordinators, she is clearly proud of this latest accomplishment in her career at the facility. During a lunch break, she has a chance encounter with a longtime benefactor who happens to be a well-known entertainer. This celebrity benefactor has also been a patient at the facility. Mary is so excited about meeting this media icon that she takes his photograph with her cell phone. She then shares the photos with her coworkers, and the next day posts them on her Facebook page. When the CEO of the facility learns of this, she contacts Mary’s director. Is there an ethical violation, dilemma, or concern?
John the CIO has been in the facility for years. He is truly a great CIO and the facility is lucky to have him. Six months ago, John hired a bright and ambitious postgraduate fellow from a university program in hospital administration. Over the six months, the relationship with this fellow proved to be fruitful especially in light of some business negotiations taking place. She admired him and respected John and he was flattered by her admiration. They spent a lot of time together especially traveling to various conferences in attractive locations. As the fellowship was nearing its end, she approached John about her future career plans. He told her that he would not be offering her a position because he said he was personally attracted to her and felt the attraction was reciprocated. She felt betrayed and used and also indicated that his comments and treatment constituted nothing other than sexual harassment. Is there an ethical violation, dilemma, or concern?
In a large, for-profit, multi-specialty clinic, strong emphasis is placed on optimizing revenue opportunities for private payer patients. The coding supervisor, a Registered Health Information Technician (RHIT) and Certified Coding Specialist (CCS), has informed the coding staff they must consistently assign E&M codes at a higher level than the documentation supports. One of the coders, also credentialed as a CCS, has expressed her concerns about the appropriateness of this direction. The coding supervisor has indicated that the concern or criticism is unwelcome and has implied the coder should perhaps seek employment elsewhere if she has concerns. However, this is the only healthcare facility within the community, and the coder is a single parent with financial responsibilities for her family. Is there an ethical violation, dilemma, or concern?
An AHIMA member shares a PowerPoint (PPT) presentation on coding for radiation oncology on a specific community within the Communities of Practice. Another member copied this PPT, modifying it only with the addition of two pictures. She then added her name as creator and posted it to a Web site. Is there an ethical violation, dilemma, or concern?
A new hospital opens in your local community and recruits for a HIM director, requiring that the person have an RHIA. A HIM professional in the community applies for the director’s position in the HIM Department and is hired. Shortly after starting her job, she is the hostess to the Regional health information management Association meeting that is held monthly in the various hospitals in the community. At the meeting, the new director is introduced as a RHIA. Several of the local members know that she has the RHIT credential, not the RHIA credential. Is there an ethical violation, dilemma, or concern?
Questions?

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