

Chapter 10

Ethical Considerations of Nursing Informatics

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ABSTRACT

Frontiers of information use and management in nursing to support clinical practice and research are being pushed further than ever before. Are associated nursing ethics also being pushed to new expression? Or is it a case of application of existing principles on this new ground? This chapter begins the debate.

INTRODUCTION

It is said that healthcare is at least a decade behind most other industries in significantly redesigning its business and clinical practices to optimise the use of technology across departments and services (Skinner R., 2003). While early investments in healthcare information technology (IT) were focused on back office and administrative functions, technology in the clinical domain is an increasingly pervasive element of healthcare delivery in many countries. Information Technology is now *top of the agenda for modernising* many healthcare systems (Royal College of Nursing UK 2006).

The future of medicine lies in technology, whether it is bio-, nano-, genetic or informational.

The possibilities of futuristic technology are immeasurable; so, too, the ethical questions surrounding its use. And it is not just future technology—ethical issues arise even now, with technologies already familiar to healthcare (Simpson R.2005).

Nurses, like many other healthcare professionals are embracing technologically enabled care delivery for two key reasons: (1) the need to reduce the cost of healthcare delivery; and (2) the desire to improve quality and enhance the patient experience.

For clinicians, the benefits of healthcare IT are numerous and include amongst others:

- Access to clinical information at the point of care;

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- A single clinical record facilitating improved communication and collaboration across the multi-disciplinary care team;
- Less time spent creating clinical documentation;
- More time available to deliver patient care;
- Creation of an auditable record of delivered care;
- Support for care planning and integrated care pathways;
- Real time integration of monitoring devices' vital sign information directly into a patient record;
- Proactive prompts for key Nursing interventions;
- Alerts that advance patient safety;
- Data for quality assurance and outcomes analysis;
- Opportunity to collect data for research; and
- Use of standardised language to document care.

The pervasive influence of technology in healthcare has created a new role for nurses – Nurse Informatician (NI). This group of specialty nurses has been educationally and operationally prepared to leverage advanced technology in an enhanced care environment.

In some countries, Nurse Informaticians undergo formal educational preparation and qualifications such as those identified by the American Nurses Association (ANA, 1994). However, in other countries including those with highly developed economies such as the United Kingdom (UK), there is a lack of Nursing Informatics expertise (Bond C., Procter P., 2009). More often than not, nurses in practice with an interest in technology lead the change.

Any interest or activity that encourages Nurses to make use of technology is laudable. However, along with IT's innumerable benefits comes ethical challenges. It is to this complex convergence of IT and nursing ethics that we now turn our atten-

tion, providing perspectives from the UK and the United States (US).

The remainder of this discussion will explore the essence of Nursing and whether technology supports or militates against nursing ethics. The Electronic Patient Record (EPR) as part of the national programme for IT in the UK will be used to illustrate the ethical implications of using technology in practice. Reference will be made to how various governing and regulatory bodies are addressing these ethical challenges. Ethical guidance will come from leading international nursing organizations.

ETHICS AND THE ESSENCE OF NURSING

Caring is widely accepted to be the essence of nursing (Potter P.A, Perry A.G. 2001) (Benner P.A., Tanner C.A., Chesla C.A. 1996). The International Council of Nurses (ICN), an alliance of national nursing associations from 128 countries, has identified four universal responsibilities for nurses practising anywhere in the world:

- Promote health;
- Prevent illness;
- Restore health; and
- Alleviate suffering (ICN, 2006).

ICN maintains that inherent in nursing is the respect for human rights, including cultural rights; and the rights to life and choice, dignity and respect. In addition, ICN urges nurses to be respectful of and unrestricted by considerations of age, colour, creed, culture, disability or illness, gender, sexual orientation, nationality, politics, race or social status.

The United Kingdom Nursing & Midwifery Council (NMC) (2008) in its Code of Conduct advises nurses and midwives that “*people in your care must be able to trust you with their health and wellbeing*”. The NMC (2008) also advises

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