

Moral concerns among independently working nurses, physicians and physiotherapists in Southern Switzerland: Findings from a qualitative study

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Background

The demand of home-based care is constantly increasing in Switzerland and in Europe. Outpatients are getting more complex as healthcare providers networks are set up to avoid an institutionalization. Within these networks, independent nurses, physiotherapists and general practitioners play an important role. If healthcare professionals working within an organization can rely on ethical committees or on clinical ethicists when facing difficult ethical decisions, this is not the case for independent healthcare professionals. The literature on the nature of ethical challenges that independent healthcare professionals encounter in their daily practice is rather scarce. Understanding their moral concerns and their need for ethical support could represent a starting point for organizing a targeted support in ethical decision making.

Research Question / Aim

Which are independent nurses', general practitioners' (GP) and physiotherapists' (PT) main concerns in respect of ethical practice? How do nurses general practitioners and physiotherapists solve their problems and deal with their concerns? What kind of support would they wish in respect to moral practice? We aimed at gaining a deep insight into nurses', GP's and PT's daily moral practice with particular attention to the moral challenges and concern they have to face. In addition to this we aimed at understanding how they solve these problems and concerns and what they could support them in their daily moral practice.

Method / Procedure

The study used an interpretive description methodology and involved in-depth semi-structured interviews with 10 independent nurses, 10 independent PT's and 10 GP's. Data were thematically analyzed according to Braun and Clark's thematic analysis. The study was reviewed, and approved, by research ethic committee in southern Switzerland.

Results

The findings show that there are common concerns among the three healthcare professionals as well as concerns that are specific to the singular categories. Common concerns include: a) unshared patients' requests; b) financial constraints; c) different opinions among healthcare professionals. Specific concerns include: a) for GPs, legal issues and pressure for benchmark according to costs; b) for nurses, providing futile care and carrying out decisions without being involved into the decision-making process; c) for PT's, not being put in the condition of alleviating patients' suffering due to limited decisional power as well the pressure to meet the expectations of the patients and the referring GPs.

Discussion

Some of the findings confirm what was already known, that is to say that conflicts among professionals and between professionals and patients' request represent a source for moral concerns among healthcare professionals working with outpatients. What this study adds is the finding of the pressure set on GP's in respect to benchmark according to the costs and the worries of legal issues; the lack of involvement in decision-making processes nurses experience and the pressure set on physiotherapists to meet the patients' and GPs' expectations.



Conclusion

This study offers new insight into independent nurses', PTs' and GPs' main moral concerns. According to these findings, a structure for ethical support could be organized in order to improve healthcare professionals' moral wellbeing.