**Self-Reflection Paper**

**Section One: Introduction**

This course has been an eye-opener for me and has greatly influenced the manner in which I make ethical decisions. Working in the field of healthcare requires avoiding harm and providing proper care to patients. Such aspects of health care form the keystone of ethical practice. As a healthcare worker, I would want to do what is right for the persons under my care but situations are not always straightforward. Situations vary and there is no one size fits all solution. This course has provided me with a foundation for making ethical decisions that comes in the form of the utility decision-making model.

Before I learned about the utility decision-making model, I had a personal approach of promoting fairness. By using fairness as a decision-making model, I believed that all people should be given equal treatment regardless of factors like economic status, gender, and age. However, such an approach is vague with regards to specific actions to guide decision making. The utility model, which is what I prefer, views an action as being ethical if it results in the best possible outcomes (Hammaker & Knadig, 2017).

Because of this course, I have learned that the utility model has six steps that guide one’s ethical decisions. First, one needs to evaluate the alternative options that are available to them to determine how they will affect the stakeholders (Hammaker & Knadig, 2017). The second step involves doing a cost-benefit analysis of the various options available with regards to the stakeholders (Hammaker & Knadig, 2017). For instance, what are the most urgent conditions? How can they be handled? What are the benefits or risks of each approach? The third step entails choosing the option with the highest utility value and least risk. The fourth step consists of predicting the consequences of the preferred option on similar ethical problems, while the fifth step entails choosing an action to take from the third and fourth step (Hammaker & Knadig, 2017). The last step in the utility model involves assessing the outcomes and making changes if necessary (Hammaker & Knadig, 2017).

I prefer the utility model because it focuses on the results. The outcomes are very important in a healthcare setup because lives are at stake. Nonetheless, the model can be difficult to use because it would require me to generate very accurate probability assessments if I am to accurately determine the outcomes of the selected action (Hammaker & Knadig, 2017).

**Section 2: Share your personal experiences and how the material has changed your attitude or actions towards ethics or conflicts in healthcare.**

I have always been a champion for fairness in the healthcare system. There are many instances where I have seen people unable to access proper care because or reasons like cost, shame, caregiver attitudes, and availability of services. Some of the instances of unfairness can be traced to ethics, especially when it touches on the conduct of caregivers and people making policies that influence the healthcare system. Such experiences have only reinforced my belief in healthcare equality. The material used in this course has been important in reinforcing my belief in healthcare equality because it has offered me with a step by step framework for making clear and concise decisions. Frameworks like the decision-making models will ensure that I always protect my patients’ rights to quality care. At the same time, these frameworks have assisted in my growth as a professional in the field of healthcare by assisting me in finding accurate information which I can then use to decide what action to take in effect when someone is at fault or could harm any patient.

**Section 3: Express how you will carry your knowledge into the world of healthcare**

The central benefit, which I have obtained from this course, is that of ethical decision making. I believe that I have always been an ethical individual. However, an ethical person without proper guidance is not effective in their role. Even though I indicated that I prefer the utility model when making decisions, there are many other techniques such as the social media, the common good, justice, choices, exceptions, and the virtue models that I can use (Hammaker & Knadig, 2017). Having a wide range of approaches, thanks to the course material means that I can make holistic decisions when it comes to matters of ethics in healthcare.

During the course, there was an HIV case that we covered a discussion. The story had a profound impact on the way I view ethics in healthcare. First of all, I believe that in the event that two people find themselves in a relationship, and one of them is HIV positive, they should not feel embarrassed to come out to their partner. At the same time, people who knowingly and willfully infect their partners with HIV should receive legal repercussions for their actions because they alter the other person’s life. Second, care should be available to HIV positive persons free of charge or in a way that is subsidized to make it available to all people regardless of income level. Moreover, those providing care should be sensitive to their patient’s condition to avoid stigmatizing them.

**References**

Hammaker, D. K., Knadig, T. M., & Tomlinson, S. J. (2017). *Health care ethics and the law*. Burlington, MA : Jones & Bartlett Learning