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Welcome to the October Nursing Grand Rounds

Guiding Principles: Nursing Ethics in a Changing World

This is a Microsoft Teams Meeting with Contact Hours

- Focus is on the presenters with all participants muted
- Participants are encouraged to post questions/comments in the “Q&A” They will be addressed during the Q & A session at the end
- Details about evaluation and contact hours will be provided at the end
 - REMINDER – now a text code process – make sure your cell number is updated in the CE Learning platform in order to receive CEs
- Session is recorded and will be available as a digital self-learning module with continuing education credit on the CE Learning platform
- Please visit the Nursing Grand Rounds webpage for direct links.

Disclosure:

None of the planners or presenters for this educational activity have relevant financial relationships to disclose with ineligible companies

IPCE Designation and Accreditation



Accreditation Statement

In support of improving patient care, Advocate Aurora Health is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

Credit Statement(s)

American Nurses Credentialing Center (ANCC)

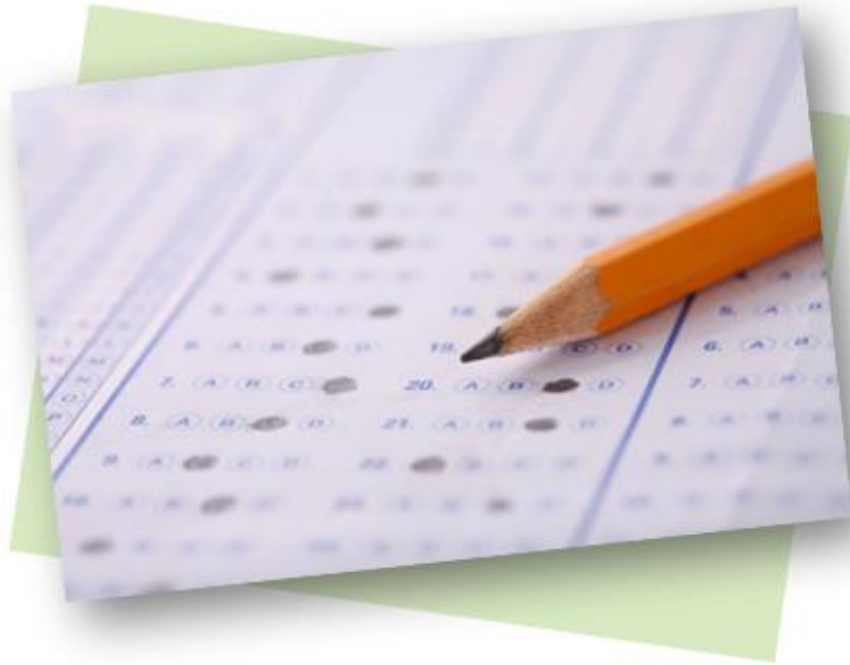
Advocate Aurora Health designates this live activity for a maximum of 1.0 ANCC contact hours. Nurses should claim only the credit commensurate with the extent of their participation in the activity.

Learner Objectives

At the end of this session, learners should be able to:

1. Discuss the ANA Code of Ethics for Nurses and highlight the 2025 updates.
2. Identify three contemporary issues: moral distress, global health,& workplace violence.
3. Relate how the code can be used to guide professional and personal decision-making
4. Describe 1-2 takeaways for your practice





AUDIENCE POLL

Which division and care environment are you attending from?



Atrium Health



Aurora Health Care



Wake Forest University
School of Medicine

Now part of  **ADVOCATE**HEALTH

Guiding Principles: Nursing Ethics for a Changing World

Stephanie King DPS, MBA, MA, HEC-C

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Nursing Grand Rounds 10.16.2025

Our Purpose

From discovery to everyday moments, we're redefining care – for you, for us,
FOR ALL.

Our Commitments

BEHAVIORS

LIFT EVERYONE UP

Make everyone feel
welcome through words
and action



Anticipate and offer support
before being asked



Represent the voices of
people that may be
overlooked or unheard

LEAD THE WAY

Embrace the best new
ideas over traditional
approaches



Inspire excellence by
delivering your
best every day



Courageously speak up
when you notice an
opportunity for improvement

THINK BOLDLY TOGETHER

Invite creative solutions
from your fellow
teammates



Work across teams to build
strong connections and
share knowledge



Be open to different
perspectives and solve
problems together

EMBRACE THE UNKNOWN

Approach mistakes as
opportunities to learn
and share takeaways
with others



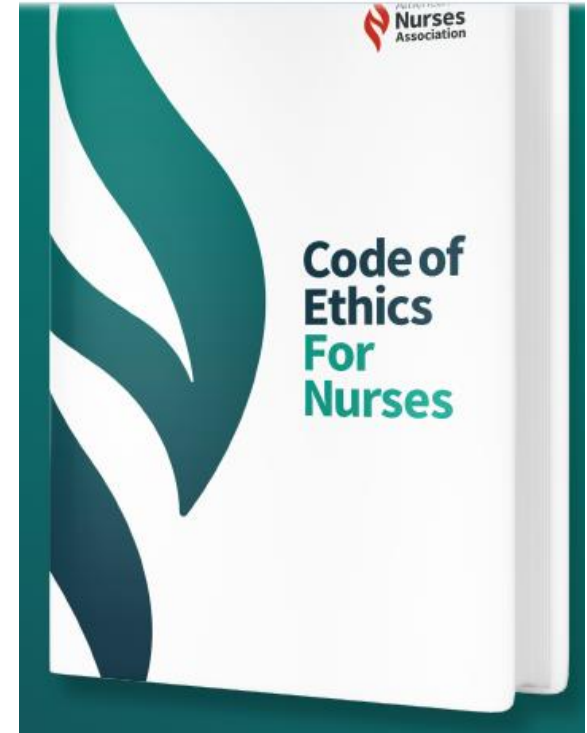
Find one positive in every
challenging situation to
keep moving forward



Ask questions to
clarify if you're not
sure about something

ANA Code of Ethics

- Key component of nursing professional identity
- 75th Anniversary of the Code
- Reviewed and updated every 10 years
- Code is structured around relationships
 - Nurse to Patient
 - Nurse to Nurse
 - Nurse to Society
- Ten provisions-Global Nursing New!



2025 ANA Code of Ethics: What's New?

- Emphasis on nurse well-being and organizational accountability
- Stronger language on health equity, social justice, and systemic advocacy
- Expanded focus on interprofessional collaboration
- Clearer guidance on addressing moral distress and resilience



Moral Distress



Definition: When nurses know the ethically appropriate action but are unable to act due to constraints.

Moral Dilemma vs. Burnout

A photograph of a multiple-choice test sheet, likely for a medical or healthcare exam. The sheet is white with blue lines and contains several questions with multiple-choice options (A, B, C, D). An orange pencil is resting diagonally across the middle of the sheet. The sheet is placed on a light green background.

AUDIENCE POLL

How many times have you experienced moral distress while working in healthcare?
(enter #)

Applicable Provisions

Provision 5.1 – Personal Health and Safety emphasizes that nurses have a duty to take care of their own health and well-being. This includes recognizing risk, fatigue, emotional and psychological stress, and avoiding unreasonable self-sacrifice.

Provision 5.3 – Integrity calls out that nurses have a right and obligation to act according to their personal and professional values, and they should express concern when institutional behavior undermines their moral integrity

Impact on Nurses

Emotional outcomes: frustration, guilt, anxiety, loss of professional integrity

Professional outcomes: decreased job satisfaction, compassion fatigue, turnover

Organizational outcomes: reduced teamwork, patient safety concerns

Sources of Moral Distress



Clinical situations: end-of-life care, futile treatments, resource allocation

Institutional constraints: policies, hierarchy, lack of voice in decision-making

External pressures: healthcare economics, societal expectations

Ethical Principles in Context



Autonomy: respecting patient choice

Beneficence: promoting well-being

Non-maleficence: avoiding harm

Justice: fairness in resource distribution

How the Code Guides Nurses

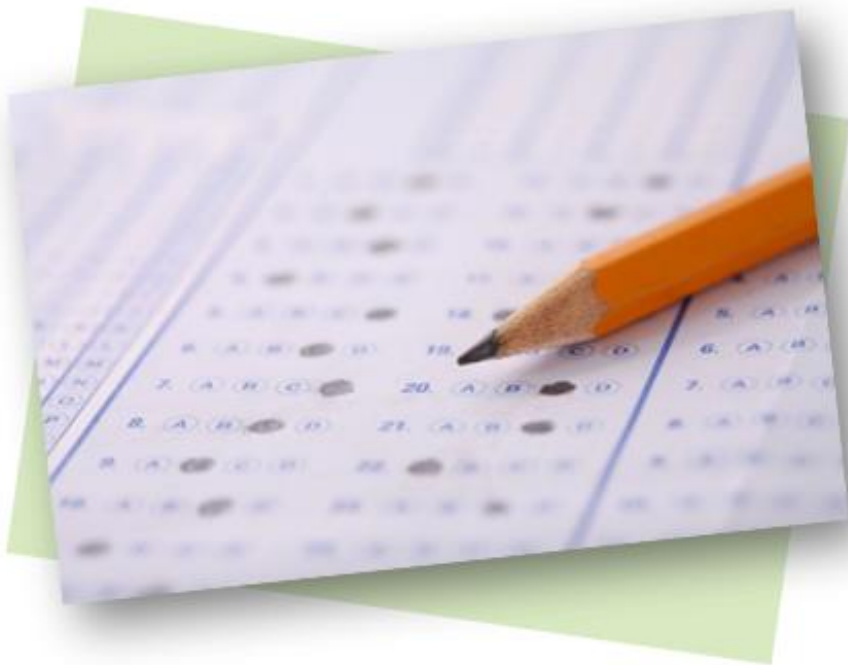
- Framework for ethical reflection and action
- Language for advocacy at personal, team, and system levels
- Reinforcement of professional integrity

Coping Strategies

Individual: mindfulness, moral resilience training, reflective practice

Peer: ethics debriefings, peer support groups, moral courage building

Institutional: ethics consultation services, safe reporting pathways.



AUDIENCE POLL

What resources are you using to help with your moral distress? (multi-select)

- Clinical ethics team
- Chaplain
- Leadership
- Education
- EAP-Employee Assistance Program
- Ethics consultation request (online)
- Other

System Level Issues

- Chronic understaffing, high workload
- Inadequate resources, inequitable care access
- Policy constraints, lack of ethics infrastructure
- Leadership and organizational culture factors

Advocacy and Change

- Strategies for nurse leaders: policy development, ethics rounds
- Role of professional organizations
- Collective advocacy: raising ethical concerns, influencing legislation
- Building a culture of ethical practice

Case Study

Scenario: ICU nurse caring for patient on prolonged life support with no meaningful recovery expected

Ethical Tension: nurse believes continued interventions cause suffering, family insists “do everything”.

Barriers: physician directive, institutional policies, family dynamics

Key Takeaways

- Moral distress is common and consequential in nursing practice
- The 2025 ANA Code of Ethics strengthens nurse advocacy and well-being
- Coping requires both individual resilience and systemic reform
- Ethical practice is collective – nurses are not alone

Think Globally Act Locally



Ethical Foundations in Global Health Nursing



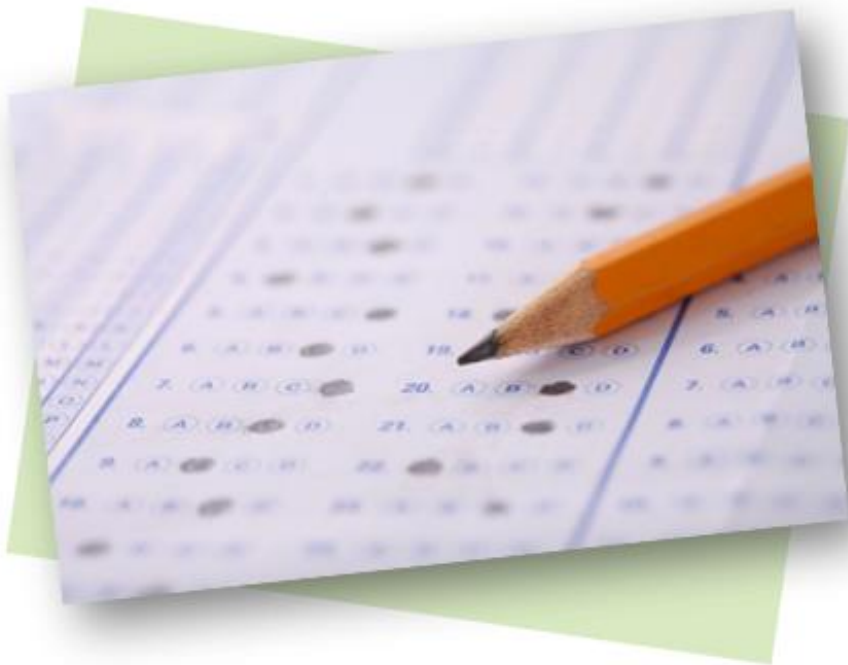
Advancing Health Access FOR ALL: Role of the Nurse



Global Health Partnerships & Power Dynamics



Acting Locally with Global Impact



AUDIENCE POLL

TRUE OR FALSE:

Nurses make up more than half of the global health workforce and are essential to achieving universal health coverage

Role of Nurses in Global Health

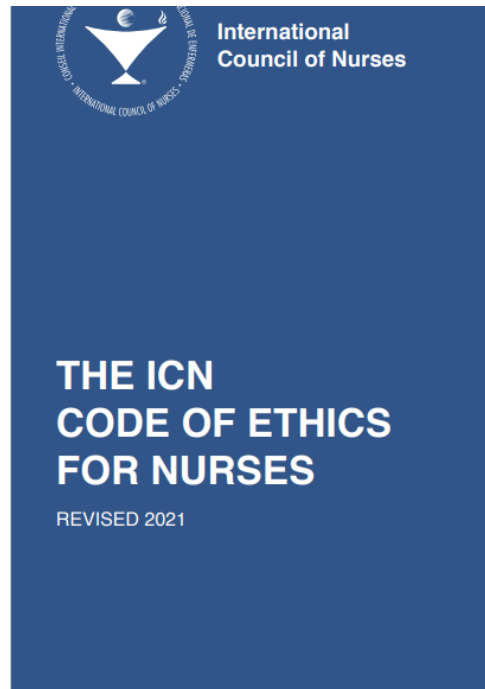
- Frontline Care Providers:
- Advocates for Health Access FOR ALL
- Crisis Responders
- Educators and Capacity Builders
- Researchers and Workforce Developers



According to the **World Health Organization**, nurses and midwives represent nearly **59% of the global health workforce**

Ethical Foundations in Global Health Nursing

- Nurses have a professional duty to advocate for equity and social justice, especially for vulnerable populations.
- Nurses are agents for structural change
- Nurses are positioned to advocate at all levels
- Nurses have a personal and professional duty to respect human rights, speak out against injustice



Ethical Implications of Global Health Partnerships & Power Dynamics

- Global health vs National sovereignty
- Impact on vulnerable populations
- Undermining scientific collaboration
- Transparency and accountability
- Domestic vs global health priorities
- Impact on Healthcare Workforce shortages



January 20th, 2025. Executive Order 14155 signed titled *“Withdrawing the United States from the World Health Organization”*

Case Study



Scenario: Maria, an experienced Internationally Educated Nurse migrates to the U.S. to work in a high-acuity hospital. While she brings deep clinical expertise, she faces not only professional and cultural challenges, but also profound ethical dilemmas rooted in global health dynamics.

Ethical Tensions Faced By Internationally Educated Nurses (IENs)

- Credential recognition vs workforce needs
- Professional identity vs role reassignment
- Cultural competence vs assimilation
- Advocacy vs vulnerability
- Equity vs systemic bias
- Patient safety vs language barriers



Call to Action

- Tailor orientation and training to aid transition to practice for IENs
- Enhance cultural humility
- Build networks that support IEN integration into the US system
- Be a buddy or serve as a mentor
- Celebrate and recognize IEN contributions
- Nurses can advocate for ethical recruitment policies that shape inclusive workplace practices FOR ALL



Reflection

“Let no one think that global health is too vast or distant to touch. Every hand that heals, every voice that advocates, every act of compassion—right here, right now—is a thread in the fabric of global change.”

— Inspired by the ethos of global nursing leadership



Workplace Violence Prevention & Ethical Considerations for Nursing

Provision 2.4: Issues of safety in the Nurse-Patient Relationship:

- Nurses are required to “create an ethical environment and culture of civility and kindness, treating colleagues, coworkers, employees, students, and others with dignity and respect” (ANA, 2025). Thus, the nursing profession will not tolerate violence of any kind, including physical, verbal, or sexual from any source.
- Nurses evaluate safety in every interaction considering physiological, physical, psychological, and emotional factors

What do nurses at Advocate Health think about workplace safety?

Questions	National Healthcare Benchmark	Illinois	North Carolina & Georgia	Wisconsin	Weighted Average
		9144 (1000) 75.8%	16752 (1000) 75.2%	8671 (1000) 77.5%	
Safety is a priority at this organization. (Teammate Engagement)	53.6	80.9 (27.3)	80.9 (27.3)	81.4 (27.8)	81.0
Safety problems are addressed when they occur. (Teammate Engagement)	70.1	82.5 (12.4)	81.9 (11.8)	80.5 (10.4)	81.7



Count

34,567

(edit)

Filter: Division = (Illinois OR North Carolina & Georgia OR Wisconsin) AND Nursing RNs and LPNs = Yes

Workplace Violence Defined

Workplace Violence is an act or threat occurring at the workplace that can include any of the following:

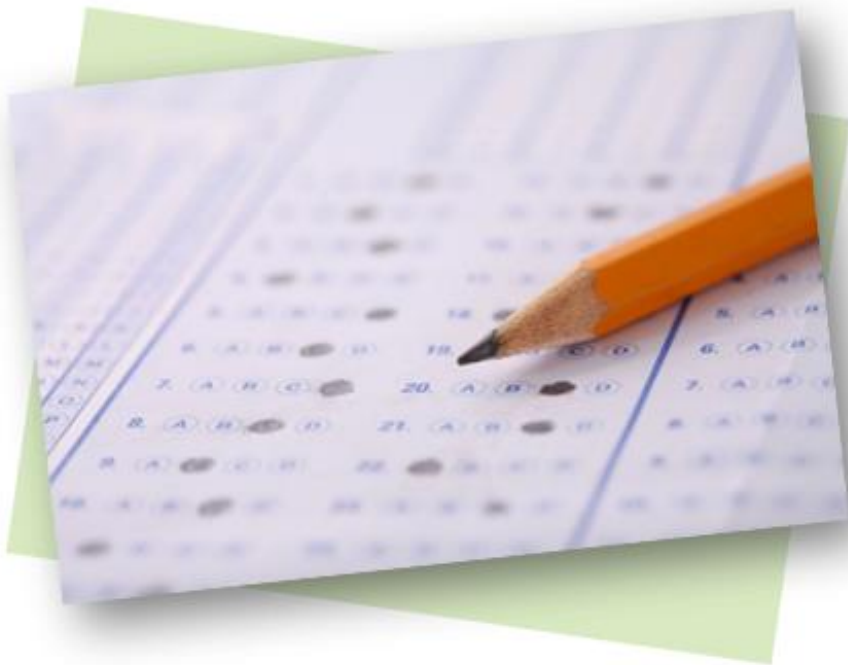
- Verbal, written, or physical aggression
- Threatening, intimidating, harassing, or humiliating words or actions
- Bullying, sabotage, sexual harassment; or physical assaults involving staff, patients, or visitors



Types of Workplace Violence

1. Criminal Intent
2. Patient or client on health care worker
3. Worker to worker (lateral violence)
4. Domestic violence





AUDIENCE POLL

What type(s) of workplace violence have you experienced? (multi-select)

- I have never experienced workplace violence
- Patient or visitor to nurse
- Worker to Worker
- Criminal intent
- Domestic violence

Trauma Informed Care

An approach to providing health care that considers the experience of each individual, how trauma may affect their lives, what symptoms they are experiencing, and then works to prevent re-traumatization.

Trauma can happen as a result of abuse, violence, neglect, loss, war, and natural disasters.

Cleveland Clinic, 2025

WPV Mitigation Strategies

Safety Event Reporting



Workplace Violence

- Report WPV events as patient safety events
- Use Epic alerts and banners to reflect patient safety risks
- Educate yourself (educational resources to follow)
- Be aware of potential threats
- Advocate for health care worker protections
- Work with leadership to suggest improvements
- Recognize Gateway Behaviors (STAMP)
- Behavioral Threat Assessment Management (BTAM)
- De-escalation techniques (Verbal TIDE)

Legislation Advocacy

Provision 9.5:

- Nurses and nursing organization should actively engage in the political process, particularly in addressing legislative and regulatory concerns that affect public health and related social and structural determinants. Nurses ought to take an active role in the democratic process, including robust civic engagement, legislative and political advocacy.
- As nurses, we know more about health care than most lawmakers. • HealingPolitics@healing-politics.org

Current/Pending WPV Legislation

Senator Tammy Baldwin (D-WI) and Rep. Joe Courtney (D-CT) are co-sponsoring bill (S.1232) (H.R.2531): The Workplace Violence Prevention for Health Care & Social Services Worker Act introduced in 2025.

[S.1232 - 119th Congress \(2025-2026\): Workplace Violence Prevention for Health Care and Social Service Workers Act | Congress.gov | Library of Congress](#)

This bill, if passed, would require OSHA to establish federal standards for mandating employers to develop comprehensive workplace specific plans to prevent violence before it happens, covers a wide variety of work environments including community settings, sets a quick timeline for implementation, sets specific program requirements that address unique needs of the work setting.

Current/Pending WPV Legislation

- Protect Health Care Workers from Violence. Congress should enact the Save Healthcare Workers Act (H.R. 3178/S. 1600). This bipartisan legislation would make it a federal crime to assault a hospital staff member on the job, similar to the protections in current law for airport and airline workers.
- IL Task Force to Address Healthcare Workforce Shortages, Regulatory Barriers, and Retention Challenges (passed 2025)
- WI Act 209 Making Threats Against Health Care Workers a Felony (passed 2022)

Educational Resources

- Advocate Health Workplace Violence Prevention SharePoint [Workplace Violence Mitigation – Home](#)
- Advocate Health Security & Public Safety SharePoint [Security & Public Safety – Home](#)
- [Well-being Programs & Resources - Home](#)
- [Verbal TIDE](#) (Trauma-Informed De-Escalation): This 45–60-minute online course provides teammates with the skills to verbally de-escalate crisis situations.
- CDC/NIOSH: [This Wasn't in the Job Description | WPVHC | NIOSH](#)
- OSHA: [Workplace Violence - Overview | Occupational Safety and Health Administration](#)

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- *If you need to claim less credit, please contact the IPCE team at cme@aah.org*
- *Credits will be stored in your account on <https://ce.advocatehealth.org>*

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Nursing Grand Rounds

Sponsored by Enterprise NGR Committee & System Nursing Research

November 20th 2025 3-4 pm Central
4-5 pm Eastern

Leveraging Advancement Projects to Improve Care

Presenters:

Heather Ludy, MSN, RN, AGCNS-BC, CWOCN, CHRN

Kara Hedvig Evans, PhD, RN, NPD-BC, NEA-BC

Cara McShane, BSN, MPH, RN, CPAN, Advocate Illinois Masonic Medical Center

Shelly Gissing, MSN, RN, Aurora Medical Center Grafton

Paul Smith, BSN, RN, CEN, Greater Charlotte

Overview:

Advocate Health offers advancement programs (e.g., Advancement/ExCEL) for Registered Nurses (RNs) to participate in professional development activities aimed at building skills, competence, and influencing nursing practice. This session will include a program overview and presentations from three RNs who have recently completed projects. They will discuss their projects, and the outcomes achieved.



Scan here to register and receive an email with calendar invite **or** join day of

Registration on the CE Learning Platform: [Click here to Register](#)  **ADVOCATE**HEALTH