Is there a professional responsibility to adopt a healthy lifestyle?

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NMC Standards for education (currently out for consultation)

Understand the professional responsibility for adopting a healthy lifestyle and maintain a level of personal fitness and wellbeing required to meet people's needs for mental and physical care



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Understand the professional responsibility for adopting a healthy lifestyle and maintain a level of personal fitness and wellbeing required to meet people's needs for mental and physical care

20.9 maintain the level of health you need to carry out your professional role, and





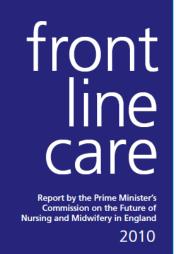
Report by the Prime Minister's Commission on the Future of Nursing and Midwifery in England

2010

Front line care (2010) set up by Gordon Brown, quietly shooed into the long grass by the coalition Government in 2010

Recommended a pledge





Front line care (2010) set up by Gordon Brown, quietly kicked into the long grass by the coalition Government in 2010

Recommended a Pledge

3 Nurses and midwives, recognizing our important role in improving health and wellbeing and reducing inequalities, will engage actively in the design, monitoring and delivery of services to achieve this. We acknowledge that we are seen as role models of healthy living and will try to live up to this responsibility.



Enabling professionalism



Enabling professionalism

in nursing and midwifery practice





Being a role model for others by:

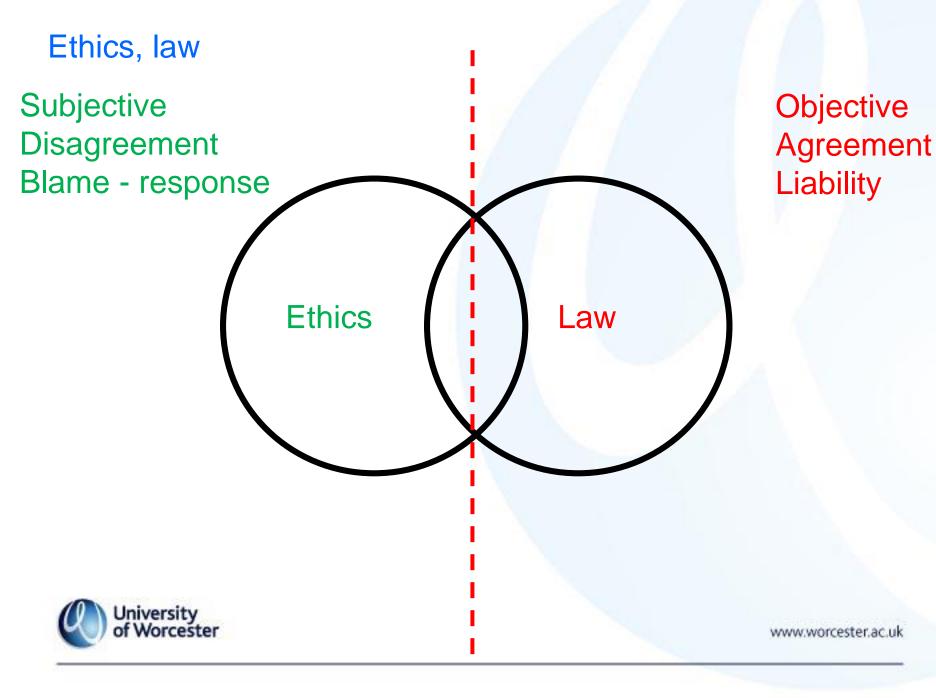
- Demonstrating and articulating clearly what professionalism looks like in practice
- Demonstrating positive behaviours and attitudes towards diversity
- Working within a clear professional career framework
- Supporting colleagues and students
- Celebrating personal success and that of others
- Developing people to take on senior roles and supporting those in senior roles
- Treating others with a positive regard
- Providing meaningful and constructive feedback to others

NMC Standards for education (soon to be out for consultation)

1.14 Take responsibility for the continuous development of their professional knowledge and skills, seeking and responding to support and feedback.

3.4 Recognise people at risk of harm and situations that may put them at risk. Take personal responsibility to work within local and national policy and legislative frameworks ensuring appropriate action is taken to provide adequate safeguarding for vulnerable people.





Ethics, law Subjective Disagreement Blame - response **Ethics** Law **Professional** codes University of Worcester

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Ethics, law, professional codes

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here

The metaethics of nursing codes of ethics and conduct

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Original article



Abstract

Original Manuscript

Can the revised UK code direct practice?

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<u>here</u>

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Abstract

The Nursing and Midwifery Council, the United Kingdom regulator of nursing and midwifery has recently revised its professional code of practice. This article begins by arguing that a professional code must be capable of sustaining close reading and of action guidance. Using four exemplar clauses, it is argued that the new revised code does not meet this purpose. First, I show that in setting out requirements for consent and documentation, the meaning of the relevant clause has changed significantly during the editing process so that a literal reading of the final document bears little relation to established



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Ethics, law

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20.8 act as a role model of professional behaviour for students and newly qualified nurses and midwives to aspire to

The Code 15

20.9 maintain the level of health you need to carry out your professional role, and



The Code

Professional standards of practice and behaviour for nurses and midwives 20.8 act as a role model of professional behaviour for students and newly qualified nurses and midwives to aspire to

The Code 15

20.9 maintain the level of health you need to carry out your professional role, and

20.3 be aware at all times of how your behaviour can affect and influence the behaviour of other people



The Code

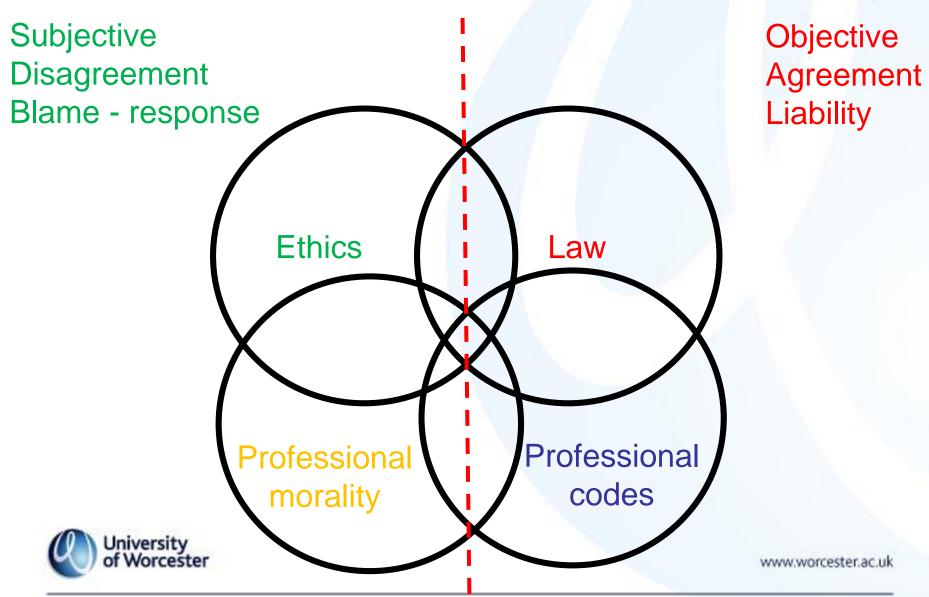
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Ethics, Law, professional Codes, professional responsibility



Tripartite model of responsibility

Agent

Obligation

Consequence

Blame

Judgement? Attitude?

Censure?

Liability?

Indignation

Disapproval



Arguments (1)

Argument from personal responsibility for maintaining health: (value based argument)

Everyone has a responsibility (obligation) to adopt a healthy lifestyle therefore nurses also have.



Arguments (2)

Argument from role modelling:

Nurses are role models (health promotion), and are less effective if they don't follow healthy lifestyles (evidence based). Therefore they should follow healthy lifestyle.

- (1) That nurses are seen as role models, by patients
- (2) That nurses agree with this
- (3) That patients don't value advice from 'overweight' patients
- (4) That role modelling (in health promotion) actually influences behaviour.
- (5) That 'overweight' nurses are less likely to offer advice



Arguments (3)

Argument from resource allocation

Nurses have a responsibility to be healthy because they take less time off sick. (values and evidence)



Arguments (4)

Argument from hypocrisy



Community matters

In each issue of the *Journal of Community Nursing* we investigate a hot topic currently affecting our readers. Here, **Jason Beckford-Ball** looks at the proposed sugar tax in NHS hospitals and health centres, and asks the question...

Should community nurses be expected to live healthy lifestyles?

Jason Beckford-Hall (2016)

Journal of Community Nursing

Similarly, it does seem perverse that an overweight community nurse can lecture a patient with diabetes or heart failure on their diet; or that a health visitor who has a few secret cigarettes at weekends can offer smoking cessation advice to a prospective mother.

We might say that our health is a private matter and that a person's lifestyle has nothing to do with their professional responsibilities. But do we really believe that? Surely the way we choose to live our lives has an impact on the validity and integrity of the advice we give to others.



Importance of the discussion

- 1. It directly concerns the issues of what it is to be a professional in relation to personal v. private life.
- It speaks to the fundamental role of nursing in relation to health promotion. Are we trying to persuade* people to change their behaviour (because it's a moral obligation) or giving them information about risks/benefits and letting them decide their values for themselves.

*persuade, cajoule, nudge, manipulate, coerce.



Conclusion

There is no such professional responsibility

More research needed (obviously!)



Conclusion

There is no such professional responsibility

More research needed (obviously!)

And, this is more fundamental, sinister even....

We should reject this because it's part of an ideological, neo-liberal agenda that sees health as an obligation largely the result of individual behaviour. Nursing should not be part of this agenda...



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