

Ethics And Evidence-Based Research

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Ethics and evidence-based research are two crucial elements of the healthcare setups; the application of ethics is needed to maintain the quality of healthcare standards, keeping in view human dignity, while evidence-based researches are focused on improving the quality of life; both are equally integral and undeniable. However, the difference in scope could lead to some potential conflicts.

Description of why ethical safeguards designed for clinical research are not appropriate for evidence-based practice implementation projects.

Ethics have considerable significance in every profession; though ethics are not tangible entities, they are growing as a crucial need. In research practices and evidence-based research, the inculcation of ethics is a common debate. Ethics is precisely defined as the set of philosophical terms that are applied to professional values. The World Medical Association has explicitly devised the Declaration of Helsinki as the code of conduct for the application of ethical principles in all the medical procedures carried out for research involving human bodies. The conflict between ethics and evidence-based learning has always been a subject under debate. Medical studies and clinical practices often face this objection dilemma (Agrawal, 2013). According to my observation, the ethical structure that has been proposed for clinical research conductance. The structure proposed for conducting the research significantly limits the scope of carrying out the project, as the safeguarding structure puts a boundary limit on choosing the evidence, selecting the protocol of the research, and the ways to treat the subjects for experimentation. The ethical safeguard structure needs the medical researcher to stand up on the tripod and fulfil the three protocols, making sure that the medical research protocol achieves the objectives of the research and ethical safeguard principles. According to the opinion of the masses, safeguarding principles are a major limiting factor in the scope of the study. In the opinion of experts, researchers should carry out their work in accordance with standards set by ethical safeguard principles (Lawrence, 2019). The idea also strengthens the unification of the international standards of research. However, the central conflict arises when it comes to finding the appropriate pieces of evidence. The evidence-based practice guidelines allow the researcher to find pieces of evidence after carrying out extensive research on the background history. Also, it suggests devising a correlation between the subject and the other case study. Thus, evidence-based practice encourages the application of onsite and background knowledge to collect data. Therefore, all these requirements compel evidence to be found within the society for carrying out medical research. Here, the evidence-based practice guidelines contradict the ethical safeguards policies.

Discussion of the three main ethical controversies related to implementing Evidence-Based Quality Improvement (EBQI) Initiatives.

Evidence-based practices have been the subject matter under discussion for a long time; in the recent past, practical steps and initiatives have been taken to include this approach in medical practices and healthcare standards. Evidence-based learning offers a stepwise strategical approach to the implementation of the system. The evidence-based quality improvement initiatives are the actual steps for making the method applicable. The strategies address a number of factors, including:

1. Leadership support for the implementation of EBQI
2. Facilitated environment for the evaluation of the initiatives
3. Establishment of patient education
4. A performance feedback loop

The main objective of the EBQI is to design healthcare standards that can immediately bring improvement and apply them systematically. However, clinical research is focused on taking a rational approach, interacting directly with the subject of research, and collecting evidence for the reasons behind the practices. Both the EBQI and clinical researchers share the same objective of improving clinical trials. Also, both involve human participation. The data collection strategies can differ; however, the data analysis and the processing procedures are almost the same. However, the scope varies. The EBQI is mainly meant to bring improvement in the particular medical setting, most particularly by addressing the specific issues in the particular subjects. However, evidence-based clinical research is more generalized, addresses the wider population, and tries to propose a solution that can be feasibly applied within and outside the particular institute/organization under study. For instance, recent research carried out in intensive care units (ICU) highlighted the statistics of the deaths that were anyhow related to catheter insertion. The research also brought into consideration the risk factors or the probabilities of the infections that are associated with catheter insertion in ICU patients. For collecting the evidence and collecting the subjects to identify the potential risk involved, both evidence-based clinical research and EBQI take two different routes. Generally speaking, the EBQI approach limits information collection and subject involvement. The evidence-based practice takes a more detailed view of the problem and involves a larger population, particularly all those having a catheter insertion history, filling in the questionnaire, critically analyzing the collected information, and then rationally devising the conclusion. Thus, many conflicts arise while implementing the clinical research and the EBQI in the same healthcare unit. EBQI focuses on the subject population under one circumstance, thus suggesting that a new treatment protocol under one setup cannot be proven beneficial in another. Analyzing the catheter insertion risk in one setting can be generalized; might the other healthcare unit lack sanitization and general care or have patients with serious illnesses? While devising ethical policies, the feasibility should be the key to remember, as the clinical researches are focused on deriving the practicality and the feasibility of the proposed

changes. It might be possible that the strategies intended to be implemented are either ineffective or need more resources to be implemented.

Identification of the ethical principles conflicting with the concept of patients having a moral responsibility to improve healthcare.

Ethics is an integral part of the coursework of nurses and other healthcare professionals. So, not only do the EBQI standards ought to be implemented in the field, but healthcare professionals are also advised to take into consideration the social and moral rights of their patients. Nursing ethics focuses on providing them with all the necessary knowledge to handle the socially vulnerable with their due rights and also about implementing the practices in a way that improves the quality of healthcare standards. Thus, the ethical provision of the nurses focuses primarily on the ways to treat the sufferers and enhance the quality of life for the rest of the cohort. Ethical training is not only based on the ways in which the nurses should treat the patients but also tries to inculcate the essential attributes of the nursing profession into their personalities. Self-reflection, empathy, responsibility, and endurance are the critical ethics attributed to the nursing profession.

However, the responsibility of implementing these ethical standards only lies on the shoulders of nurses and healthcare professionals. It's always a two-way process; thus, in recent parts, many theories have been put forward that emphasize the involvement of the patients in implementing these initiatives in the healthcare units.

The clinical procedures and practices often try to involve the patient irrespective of their inclination, as they have been taught to save lives and bring improvement in the quality of their lives. However, ethical EBQI for patients put a contradicting stance from the patient's perspective. Many ethical theories demand that the healthcare staff take into consideration human dignity and respect the level of their self-determination. Nursing ethics encourage every nurse to take into account the healthcare requirements of each patient by establishing a professional relationship with every single patient. However, taking into consideration the patient's needs according to the ethical standards might prove to be contradictory. Thus, conflicts arise. This relationship between nurses and patients plays a clashing role when the patients think to be treated in a way that is not in coherence with the severity of the illness and then can later be proven fatal. The medical caretakers, including the doctors and nurses, consistently build up their associations with the patients according to professional standards while conveying their nursing administrations regarding human qualities without preference (Stanak, 2019) as the procedures and interventions are intended to bring improvement in the human life quality.

b) Discussion of how these conflicts may be resolved.

As previously stated, [healthcare standards](#) and ethical principles share the same objective of bringing improvement to health setups; however, the scope of both initiatives might differ. This serves as the primary cause of conflict between the two. Yet, by taking a few feasible, practical steps, the issue between both can be significantly settled. In my opinion, the following approaches can resolve these conflicts: educating is the crucial step for practising. Creating more and more awareness about the ethical practices in healthcare setups can bring more practical revolution. Specifically, conducting seminars and training the actual hospital staff, particularly field liners like nurses, can bring significant change. If the EBQI agencies sponsor books and magazines regarding these ethical standards, then they can significantly contribute to educating the patients within each hospital setup. Thus, the public will also be aware of the criteria by which they should be dealt with in any healthcare department.

The involvement of field workers, like doctors and nurses, before devising this healthcare system and its ethical standards should be encouraged. As on the call, we are exhibiting evidence-based learning. Thus, they can more effectively tell about the problems they have encountered while following these practices. So this will help in setting realistic, generic, and feasible standards that could be implemented in any healthcare setup.

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