



HB 303 Opposition Testimony

MNA is the recognized leader and advocate for the professional nurse in Montana. MNA is the state professional nurse's association representing the voice of Registered Nurses (RNs) and Advanced Practice Registered Nurses (APRNs). MNA is the recognized professional organization, which lobbies for nursing practice issues to protect the practice of professional nurses and also protect the public in all areas of health care.

HB 303 is government overreach and interferes with patient provider relationships. This bill is not needed. Nursing, as a scientific evidence-based profession has addressed conscience-based objections for many years. This is done through our Code of Ethics for Nurses, that governs our practice and supports the patient; and supports the nurse, who may have a deep-rooted conscience-based objection. The Code of Ethics for Nurses acknowledges that patients under the care of a nurse have the moral and legal right to self-determination. Nurses have a duty to respect the decisions of their patients. Respect for patient decisions does not mean that the nurse must agree or support the decision. The Code of Ethics for Nurses requires nurses to provide their patients with "accurate, complete and understandable information in a manner that facilitates an informed decision." Nurses should assist patients with weighing benefits, burdens, and available options, including the choice of no treatment, no matter the situation and especially when discussing sexual health issues and pregnancy. MNA believes that nurses and all healthcare workers should be aware of the history of misogyny, racism, sexism and other forms of discrimination that has led to the existing inequities, inequalities, and limited access to healthcare including sexual and reproductive healthcare for certain populations and we do not need a bill that contributes to further limiting access.

The nurse-patient relationship is the foundation of nursing ethics. The Code of Ethics for Nurses with Interpretive Statements (2015) is clear: the nurse's primary responsibility is to practice with compassion and respect and recognize the dignity and uniqueness of each individual. Nurses have an ethical obligation to their patients in assisting their health and well-being. Nurses hold respect for patient rights as paramount. Nurses work together with clinical peers and leaders to develop a consensus on how to navigate ethical situations all the while keeping the patient at the forefront.



The **exercise of or right to** Conscience objections **cannot** be blanket refusals. They cannot result in discrimination or result in unsafe patient care. Interpretive Statement 1.2 of the Code of Ethics for Nurses notes that “respect for patient decisions does not require that the nurse agree with or support all patient choices” (p. 1), thus the nurse is not required to compromise their integrity in the provision of such care. Such situations may result in the nurse experiencing moral distress. “When a particular decision or action is morally objectionable to the nurse, whether **intrinsically** so or because it may jeopardize a specific patient, family, community, or population, or when it may jeopardize nursing practice, the nurse is justified in refusing to participate on moral grounds. Conscience-based refusals to participate exclude personal preference, prejudice, bias, convenience, or arbitrariness” (ANA, 2015a, p. 21). In no instance should a nurse refuse to treat a patient based on that patient’s individual attributes; such treatment violates one of the central tenets of the professional Code of Ethics for Nurses.

A **well-established** ethical commitment when declining to provide care on moral grounds is the primacy of patient care. “Nurses are obliged to provide for patient safety, to avoid patient abandonment, and to withdraw only when assured that nursing care is available to the patient” (ANA, 2015a, p. 21). If a nurse feels that a moral or ethical consideration prevents them from delivering health care services, then the nurse, the full medical team, and/or the practice, institution, healthcare system, or agency, makes an exhaustive and good-faith effort to ensure that the patient receives those health care services.

Nurses have an ethical obligation to safeguard the **right to privacy** for individuals, families, and communities, allowing for decision making that is based on full information without coercion. MNA firmly believes that no nurse should be subject to punitive or judicial processes for upholding their ethical obligations to their patients and profession.