

**Principles of Code of Professional Conduct  
for Nurses in the Sultanate of Oman**

**2019  
Ministry of Health**

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## Introduction

The code of professional conduct was developed for multiple audiences; these include, student nurses in training, the public at large, communities, employers and those vested with regulating the profession. The code is framed by principles and standards laid down in the United Nations universal declaration of human rights. Islam is at the centre of society in Oman, at all levels of societal functioning, therefore the Holy Quran plays a central role in defining and articulating ethical standards for the nursing profession. The code demonstrates the nursing professions' commitment to respect, promote and protect the rights of people who are both recipients and providers of nursing and healthcare. Locally the code was constructed taking into consideration the Oman national laws, and how those laws impact on the role of nurses in the healthcare system. The code utilises key concepts embedded in the International Council for Nurses code of ethics. These include the nurse and the profession, the nurse and the environment, the nurse and co-workers, and the nurse and healthcare users / carers / the public.

This latest version of the code evolved in response to the changing face of healthcare. The current and future projected emphasis on health promotion and health education means that nurses are at the forefront when developing, implementing and evaluating health promotion and health education strategies. Equally the increased complexity of long term illnesses means that inter-professional approaches are required to tackle complex health problems. This involves nurses leading and working in healthcare teams, using new ways of working and communicating. At the same time social media and social networking now plays an increased role in both our professional and private lives. Social media offers opportunities for rapid knowledge exchange and the nurturing of professional relationships. However, these benefits don't come without potential risks for individuals, health professionals, healthcare users / carers, and healthcare organisations.

## **Process**

The process of developing the latest version of the code involved an assessment of professional and contextual changes since the development of the last version of the code. A focus group activity was conducted with nurses, nurse leaders, educators and researchers. This was supplemented by a review of international literature, focussing on the related legal ethical and professional issues. In parallel to these activities research conducted locally in relation to nurses' knowledge, attitudes and practice related to the code of professional conduct contributed new understandings of the local context. Following this a consultation process with national stakeholders enabled us to frame our findings into a cohesive set of code standard statements. The next part of the process was to bring together excerpts from the Quran, with legislation and relevant policies in order to help frame the code in terms of relevant legal, ethical and professional issues. The final part of our process involved integrating information from different parts of the project to finally develop the code of ethics and professional conduct.

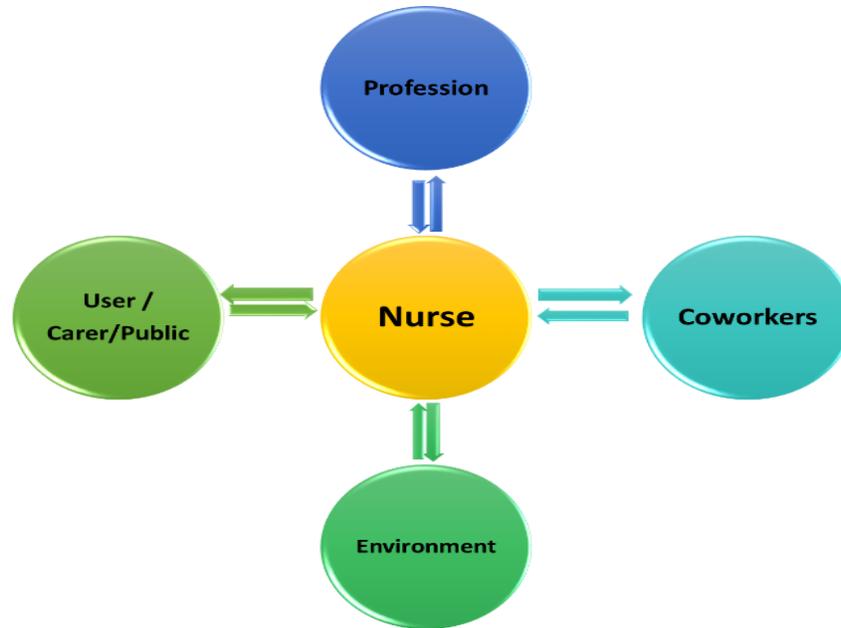
## **Purpose**

The code provides guidance for ethical relationships, responsibilities and standards of conduct expected of registered nurses working in Oman. It serves as a tool to support nurses when reflecting on their own practice, and the practice of others. The code also provides an ethical basis, from which nurses can rationalise and advocate for quality healthcare environments.

## Conceptual Model

### Nursing Relationships

The following conceptual model was adapted from ICN, (2012) and applied to the local context.



The conceptual model reflects the relationship nurses have with different elements whilst performing their role. The underlying concept is that during interaction with the different elements (user / carer / public, profession, co-workers and environment) nurses require guidance related to ethical relationships and standards of conduct. These points of interaction also pose the greatest 'risk' for nurses in terms of ethical relationships and behaviours related to conduct. Therefore if these points of interaction pose the greatest ethical 'risks' for nurses these elements should form the headings that guide in-depth discussion related to each Code statement.

## **Definitions**

### **Profession**

The conceptual model is concerned with the interaction nurses have with the nursing profession. For example nurses as professionals are responsible to maintain a current and active registration.

### **Co-workers**

Nurses work as members of the multidisciplinary team; this involves working and communicating in teams. Co-workers may be other nurses, but they may also be other members of the healthcare team, including non-registered members such as medical orderlies.

### **Environment**

Nurses work across a variety of care contexts including hospitals and the community in which people live. The environment refers to any place where nursing care is situated.

### **Nurses and Healthcare Service Users / the wider public**

User refers to anyone that uses healthcare services in Oman. The word healthcare service user was selected rather than patients because not all healthcare service users are patients. Carer refers to anyone with caring responsibilities for another person. The word carer was selected rather than family, because not all carers are family members. The word public refers to members of the public that are not currently users of healthcare services or carers.

### **Practitioner/Manager**

Practitioner relates to a nurse registered to practice nursing in the Sultanate of Oman. Manager refers to a designated nurse with leadership authority and accountability for a group of nurses.

**Educator/Researcher**

Educator relates to nurses with designated roles that involve the training and / or education of Nurses. Such roles may exist in an education setting, or in health services such as regional hospitals. The word researcher relates to any registered Nurse involved in the research process, or any Nurse planning to conduct research. Researchers could be Nurses based in an educational institution (E.g. higher education) or the healthcare system

**Regulator**

Regulator refers to the designated regulator of the nursing profession. Ministry of Health now assumes regulatory responsibilities.

## Code Statements

- 1. Nurses **work in teams** to deliver safe, compassionate, competent and ethical care*
- 2. Nurses protect the **privacy and confidentiality** of healthcare service users, ensuring that service user's self-respect and self-esteem do not suffer as a consequence of acts or omissions of nursing care.*
- 3. Nurses **respect the dignity**, culture, ethnicity, values and beliefs of health service users and their colleagues*
- 4. Nurses are **accountable** for providing safe, compassionate, competent and ethical care*
- 5. Nurses must ensure they **gain consent** from healthcare users before implementing nursing care or prescribed treatment*
- 6. Nurses promote and preserve the **trust and privilege** inherent in the relationship between nurses and healthcare service users and the wider public*
- 7. Nurses must act to **identify and minimize risk** to healthcare service users, their families and the wider public*
- 8. Nurses must possess the **knowledge, skills and abilities** required for lawful, safe and effective practice*
- 9. Nurses promote, **advocate for and, protect the rights**, health and safety of health service users.*
- 10. Nurses work with healthcare service users and the wider public to enable them to achieve their **highest possible level of health and wellbeing**.*

## **The Layout of the Code**

The list of ten Code statements is followed by an in-depth focus on each identified Code statement. An initial explanation is given related to each code statement in order to enhance reader understanding. The headings in the conceptual model – *Nursing relationships* (Nurses and Co-workers, Nurses and the Environment, Nurses and Health Service Users / the wider public, and Nurses and the profession) are used to systematically discuss each Code statement in-depth. Following this the application of the Code statement is explored in a table from the perspective of: practitioners / managers, educators / researchers, and the profession’s Regulator. The final section of the Code consists of a glossary of terms followed by a list of the relevant resources consulted during the development of the Code. The Code statements are not numbered as each statement is as important as the other, there is no order of priority.

## **Statements of the Code**

## Statement 1.

### **Nurses work in teams to deliver safe, compassionate, competent and ethical care**

The health care needs of the population are becoming more complex, people are living longer and as a consequence of this are developing complex long term conditions. The major causes of morbidity and mortality in the country are now non-communicable diseases, including diabetes, hypertension, heart disease, and cancers, these often occur as multiple pathologies rather than in isolation. In order to respond to these complexities nurses are required to work in teams with healthcare colleagues to provide shared and ‘joined up’ solutions to complex health problems.

#### **Nurses and Co-workers**

Nurses work in collaboration with others to protect and promote the health and wellbeing of healthcare service users, their families and the wider community. This includes sharing information with healthcare colleagues involved in that care, and sharing knowledge and experience for the benefit of healthcare services users, their families and the wider community. Collaboration requires mutual trust, recognition, respect, transparency, shared decision making and open communication amongst all those involved in healthcare provision.

For care to be safe, compassionate, competent and ethical nurses must establish that anyone they delegate to can perform those instructions to an accepted standard. Nurses must also ensure that anyone they are responsible for gets the requisite supervision and support so that nursing practice achieves the accepted standard. This includes supporting students and others in their developmental process to achieve clinical competence.

#### **Nurses and the Environment**

Nurses as members of the healthcare team advocate for healthcare environments that maximise the quality of health outcomes for service users, their families, and the community. Nurses work in collaboration with healthcare colleagues, organisations, policy makers at institutional, regional, national and international levels to influence ethical practice. Nurses must inform a person in authority if they experience problems in working within this code and other nationally agreed standards. Any concerns must be reported in a written format if problems in the care environment are putting healthcare service users, their families or the wider community ‘at risk.’

### **Nurses and Health Service Users / the wider public**

Nurses as members of the healthcare team must collaborate with healthcare service users, their families and the wider community regarding their concerns, priorities and needs. Nurses explain and share information with healthcare service users that they either want or need. Nurses give information that is honest and accurate in a way that can be understood. Nurses must endeavour to meet the language and communication needs of healthcare service users and their families if at all reasonably possible. Nurses must ensure that if healthcare service users are ‘not capable’ to make informed decisions, this fact is shared with others in the healthcare team. Nurses must also ensure the care delivered is in the ‘best interests,’ of healthcare service users and reasonable steps have been taken to find out that person’s views. Nurses must use their expertise and influence within the healthcare team to promote the health and well-being of vulnerable people, groups and communities.

### **Nurses and the profession**

Collaboration with healthcare professions colleagues at different levels in the healthcare system offers new ways of working and new solutions to complex health problems. Nurses must ensure that the needs of healthcare service users, their families and the wider community are a priority in any such arrangements. Nurses must support the actions of colleagues that have protected healthcare service users, their families or the wider community from incompetent, unsafe or unethical care.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Work in collaboration with colleagues to develop a ‘joined up thinking approach’ to solve healthcare service user health problems	Ensure that health professions curriculum supports the transition to preventative healthcare strategies to facilitate lifestyle changes	Develop service and education audit and evaluation strategies that enable inter-professional collaboration from both health services and education perspectives
Work collaboratively with health professions colleagues to develop joint policies procedures and guidelines.	Work in collaboration with health professions education colleagues to develop inter-professional learning and teaching opportunities.	Develop standards and guidelines that reflect the importance of collaboration, both in the service and education contexts.
Advocate for healthcare service users, their families and the wider community, at leadership and policy levels, for quality health care environments.	Provide shared learning opportunities dedicated to developing and maintaining positive healthcare environments.	Develop standards and guidelines that support, enable and require collaboration to promote quality healthcare environments.
Use your influence within the healthcare team to promote the health and wellbeing of vulnerable people, groups and communities.	Introduce the concepts of justice and fairness related to vulnerable groups across health professions curriculum.	Ensure issues of justice and fairness when discussing vulnerable groups are included in the national Code of ethics and Professional Conduct.

## **Statement 2.**

**Nurses protect privacy and confidentiality of healthcare service users, ensuring that service user's self-respect and self-esteem do not suffer as a consequence of acts or omissions of nursing care.**

Nurses must ensure that information given to them by healthcare service users in confidence will only be used for the purpose it was meant for. Nurses have an ethical and legal obligation to protect the personal information of healthcare service users gained in the process of performing their professional role / duty. Nurses respect policies that protect peoples' privacy, including the protection of information accessed or stored through information technology. (E.g. Health information systems).

### **Nurses and Co-workers**

Nurses and other healthcare professionals are entitled to the same moral, professional and legal safeguards as any other person in relation to their personal information. Nurses have the right to expect that their personal information will not be shared with another person without their consent, however in special circumstances disclosure can be sanctioned by a court of law. Nurses ensure professional colleagues are given reliable information about the risks posed by people to whom they are providing or planning to provide care, subject to approved policies and relevant privacy and other legislation.

### **Nurses and the Environment**

Information about healthcare service users gained by nurses during the performance of their role must be kept secure and private in a designated area. (E.g. Healthcare information systems) This has major implications for the care environment; the places used by nurses and other health professionals to store and retrieve information, and the accessibility and security of such information. Therefore when personal information is required for teaching, research or quality improvement purposes nurses must protect healthcare service users' anonymity and privacy. This includes password protecting computers, laptops and other devices in which information is stored, and not facilitating the sharing or copying of information. This includes not copying and sharing such information on social media and social networking platforms.

### **Nurses and Health Service Users / the wider public**

Nurses must seek the consent of healthcare service users before disclosing their personal information. In the absence of consent nurses must use professional judgement regarding the need to disclose details, paying particular attention to the interests, wellbeing and health and safety of healthcare service users in their care. Nurses must be aware that they may be required by law to disclose certain information for professional purposes. In the event of service users being children consent must be obtained from a parent or designated responsible adult. In the event of suspicion of child abuse, Nurses must comply with local policies and national laws when it comes to the disclosure of information.

Nurses must be aware that when they are talking with healthcare service users, their families or other healthcare professionals they must take reasonable steps to prevent confidential information from being overheard. Nurses must not abuse their access to personal information held in healthcare service users' medical notes or records. This includes the nurses' own records, records of family members, or other people for purposes not compliant with their professional role.

Nurses must not use social media, or photo technology to intrude into the privacy of healthcare service users or their families. Social media platforms must not be used to discuss healthcare service users or practice issues as healthcare service users may be able to be identified from the information provided. The ease with which information is shared via social media may blur or make unclear the line that separates personal and professional lives. Nurses are responsible for maintaining the same standards of professional behaviour on social media and social networking platforms as they would in face-to-face encounters. Nurses must intervene if others inappropriately access or disclose personal health information related to healthcare service users under their care, such breaches of confidentiality must be reported to the nurse's line manager immediately.

### **Nurses and the Profession**

Nurses maintain a professional boundary between themselves and healthcare service users, their families and people nominated by the healthcare service user to represent them. Rapidly evolving technology and the increasing convenience of social media platforms means nurses must be mindful of postings, images, recordings or commentary that intentionally or unintentionally

breaches healthcare service users' rights to confidentiality and privacy. Trust between healthcare service users and nurses could be jeopardised by unauthorised access to data or by unwanted inappropriate disclosure of personal information. These types of behaviours could put at risk the trust of the wider community in the Nursing profession.

### **Applying the Code**

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
<p>Develop health service policies that govern who gains access to what information, when and why.</p> <p>Take reasonable steps to ensure confidentiality and privacy are supported in the care environment; this includes physical, psychological and social spaces.</p>	<p>Ensure nursing curricula enable nursing students to reflect – on the rights of a person to keep personal information confidential.</p> <p>Researchers must ensure personal information related to healthcare service users used in the course of their research is fully protected.</p>	<p>Evaluate the implementation of relevant policies that govern access to and use of information in the healthcare setting.</p> <p>Provide guidelines for researchers in terms of accessing, retrieving, using, and sharing personal information of healthcare service users and health professionals involved as participants in healthcare research.</p>
<p>Develop policies, procedures and guidelines that govern, and provide guidance on the use of social media by nurses</p>	<p>Facilitate reflection by student nurses on the positive aspects of social media in professional life, and the concerns and potential pitfalls technology poses.</p>	<p>Develop guidelines for social media use that support healthcare service user confidentiality and privacy.</p>

### **Statement 3.**

#### **Nurses respect the dignity, culture, ethnicity, values and beliefs of healthcare service users and their colleagues**

In making healthcare decisions related to nursing care, nurses work with healthcare service users, families, groups, populations and communities, respecting their individual values, customs and spiritual beliefs, as well as their social and economic circumstances. Nurses establish a relationship built on trust with healthcare service users by being honest, acting in a consistent manner, and delivering safe and effective care. Nurses must make healthcare service users the centre of all healthcare decisions.

#### **Nurses and Co-workers**

Nurses treat each other, colleagues, other healthcare professionals and students in a respectful manner, recognising the differences in power of those professionals designated as leaders, staff, and students. Nurses acknowledge the experience and expertise of healthcare colleagues; they respect the contribution of colleagues from other professions in the care of healthcare service users. Nurses support, act as preceptors and mentors and teach colleagues and other healthcare professionals, especially students and those with limited experience. Nurses must work with others to resolve conflict in a constructive manner.

#### **Nurses and the Environment**

Nurses take reasonable steps to ensure that the physical care environment enables healthcare service users to maintain their privacy and dignity. This includes practicing in such a way that respects healthcare service users' differences and does not discriminate in terms of ethnicity, religion, gender, political or other opinion, disability or age.

#### **Nurses and Health Service Users / the wider public**

Nurses recognise the potential vulnerability of healthcare service users and they do not exploit their trust and dependency in any way that may compromise the therapeutic relationship. They do not abuse this professional relationship for personal and / or financial gain, and do not enter into

personal romantic relationships with healthcare service users, members of their family, or healthcare service users' representatives.

Nurses must take steps to minimize the risk and to ensure the care they deliver does not harm the health or safety of healthcare service users, their families or the wider community.

### **Nurses and the Profession**

Healthcare service users' trust in the care provided by colleagues and other healthcare professionals should not be undermined by unfounded negative comments or criticisms, made by individuals or groups of Nurses. This includes using social media as an outlet to voice unfounded or negative comments. Nurses respect the property and resources provided by their employer in their place of work. Nurses maintain high standards of professional behaviour in relationships with their employer. They ensure they only claim allowances for the time they were employed or provided nursing services. They adhere to organisational policy and standards when delivering care and protecting public safety.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
<p>Develop health service policies that support privacy and dignity of vulnerable healthcare service users. Including women and children and vulnerable adults.</p> <p>Reflect-on the role of the nurse in maintaining the dignity of vulnerable groups.</p>	<p>Ensure nursing curricula enable nursing students to reflect – on the role of the nurse when caring for vulnerable groups including women, children and vulnerable adults.</p> <p>Facilitate shared learning environments in health professions education, to enable students to develop a deeper understanding of the role and responsibilities of health professions other than their own</p>	<p>Develop guidelines for nurses related to professional relationships and professional boundaries.</p> <p>Develop guidelines to facilitate consultation and collaboration with healthcare service users in terms of:</p> <ul style="list-style-type: none"> <li>• Health professions curriculum</li> <li>• Evaluation of, changes to and development of new health services</li> </ul>
<p>Nurse leaders must ensure healthcare service users ideas, preferences, wishes and opinions are sought when making changes to nursing services, proposing new services, or evaluating existing services.</p>	<p>Nurses participating or overseeing research must do so in accordance with recognized guidelines. They must ensure they do not violate their duty of care to the healthcare service user.</p>	<p>Develop and implement standards to support learning in clinical practice, including, the provision of resources, the role of the preceptor, preceptor preparation and learning teaching and assessment in the practice setting.</p>

### Statement 3.

#### **Nurses are accountable for providing safe, compassionate, competent and ethical care**

Every registered nurse is accountable for ensuring healthcare service users receive safe, effective compassionate and ethical care. Nurses carry personal responsibility and accountability for any acts or omissions related to their professional role, and for maintaining clinical competence through continuing professional development. Accountability implies an obligation for a nurse to answer for their activities, accept responsibility for them, and to disclose the results in a transparent manner.

#### **Nurses and Co-workers**

Nurses practice within the limits of their competence. When aspects of care go beyond their level of competence they must look for additional information or knowledge, and / or look for help from their supervisor or another competent practitioner. They may also request a different work assignment, if they feel through lack of the requisite knowledge or skills; they are not in a position to provide safe and effective care. Until alternative arrangements are made the Nurse must remain with the healthcare service user that requires care. If a colleague is unable, for whatever reason to provide safe, compassionate and ethical care, nurses must take the necessary steps to protect the safety of healthcare service users.

Nurses share their knowledge and skills, provide feedback and preceptorship to support the professional development of student nurses, inexperienced nurses, and other members of the healthcare team. Experienced Nurses also provide long term mentorship to support the career development and progression of colleagues.

#### **Nurses and the Environment**

Nurses participate with others in creating a positive working environment, maintaining safe, equitable, social and economic working conditions. When resources are not available in the healthcare environment that enable Nurses to deliver care to the standard stated in this Code of Ethics and Professional Conduct, Nurses collaborate with others, including Nurse Leaders to

make adjustments and minimise harm to healthcare service users, their families and the wider community. Nurses must collaborate with Nurse Leaders / employers, and keep healthcare service users / families informed of any planned or actual changes to health service provision.

### **Nurses and Health Service Users / the wider public**

Nurses use appropriate knowledge and skills when assessing the health needs of healthcare service users, planning, implementing and evaluating their care. They also make themselves readily accessible to healthcare service users and colleagues when they are on duty. Nurses must possess the required knowledge and skills for safe and effective practice when working without direct supervision. They must recognise the limits of their competence and work accordingly within those limits. Nurses must know when to make appropriate referrals to more experienced colleagues when faced with situations beyond their current level of knowledge or skill. Nurses must endeavour to keep their knowledge and skills up to date throughout their working lives. In order to do this nurses are expected to take part in learning and practice activities that not only maintain, but further develop their competency and performance.

### **Nurses and the Profession**

Nurses must adhere to the laws of the land in which they are practicing. Nurses practise according to the Code of Ethics and Professional Conduct for registered Nurses, in-line with professional standards, laws and other regulations supporting ethical practice. Nurses are honest and trustworthy in all their professional activities. Nurses are accountable for maintaining high standards of professional and personal behaviour. The same standards that apply to face to face relationships and encounters apply online when accessing and posting on social media, social networking and other electronic platforms.

**Applying the Code**

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
<p>Develop policies, procedures and guidelines to support positive working environments.</p> <p>Nurse leaders negotiate with education providers to ensure that 75% of nurses working in specialist areas of practice successfully complete a post-basic specialist nursing program.</p>	<p>Promote positive working environments through a variety of learning and teaching activities.</p> <p>Nurse education providers negotiate with Nurse Leaders and health service planners to ensure that 75% of nurses working in specialist areas of practice successfully complete a post-basic specialist nursing program.</p>	<p>Develop standards and evaluation tools to monitor the implementation of strategies that support a positive working environment</p> <p>Set and monitor standards related to post-basic education, including the numbers and types of post-basic nursing qualifications required in the healthcare system.</p>
<p>Develop policies to support the positive use of social media.</p>	<p>Enhance the awareness of students and other staff related to the safe and ethical use of social media</p>	<p>Develop and implement guidelines for social media use that emphasizes the same standards in face to face relationships and encounters for Nurses using social media and other electronic communication platforms.</p>

## **Statement 5.**

### **Nurses must ensure they gain consent from healthcare service users before implementing Nursing care or prescribed treatment**

Nurses ensure that nursing care is provided with the healthcare service users' informed consent. For consent to be valid it must be voluntary and informed, and the healthcare service user must have the capability to make the decision. The decision to consent or not consent must be made by the healthcare service user themselves, and must not be influenced by pressure from healthcare professionals, family or friends. The healthcare service user must be given all the information in terms of what the treatment or care involves, including risks and benefits, whether there are reasonable alternatives, and what would happen if the treatment or care did not go ahead. The healthcare service user must be capable of giving consent, which means they understand the information given to them and they can use it to make an informed decision. If a healthcare service user does not have the capacity to make a decision regarding their treatment or care, healthcare professionals providing that care can go ahead and give care if they believe it is in the healthcare service user's best interests. However health professionals must take reasonable steps to seek advice from the healthcare service user's family and friends before making these decisions.

### **Nurses and Co-workers**

Nurses whenever possible inform healthcare service users that in order to provide compassionate, competent, ethical care it may be necessary to disclose information that is necessary for clinical decision making. Information therefore may be shared with other members of the healthcare team, on a need to know basis.

### **Nurses and the Environment**

Nurses promote a culture of respect that values autonomy of a person and enables competent people to make informed decisions related to their own health and care. Nurses also promote a culture that protects vulnerable people and groups, keeps their interests central in all decision making processes and defers relevant decisions to advocates designated as decision makers when necessary.

### **Nurses and Health Service Users / the wider public**

Nurses recognise and respect a capable person's wishes to decline or withdraw consent for treatment or care. Nurses are sensitive to the power differentials between healthcare providers and those receiving care. They do not misuse that power to influence the outcome of decisions.

Family members may disagree with decision(s) made by health service users; in this case nurses must assist families to develop a deeper understanding of that person's decisions. When illness or other factors influence a person's capability to make informed decisions or life choices, nurses assist and or support that person to be involved according to their capability. If a health service user is clearly NOT capable of making informed decisions / choices, (E.g. loss of consciousness) nurses must keep the interests of that person as central when deferring decisions to an appropriately designated decision maker. This may be a health service user's relative, friend, or designated representative.

### **Nurses and the Profession**

Nurses strive to uphold professional standards by seeking the consent of service users, designated decision makers, family members, friends and colleagues when accessing, developing, storing, retrieving and copying confidential material. Social media platforms have increased the ease with which health professionals can copy and share information. Although this can be very beneficial in terms of learning resources it can also inadvertently lead to the breach of privacy and confidentiality. Such breaches could potentially undermine public trust in the profession.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Healthcare policies and procedures support autonomy of a person, and protect vulnerable groups from all forms of exploitation.	Nurse educators promote 'autonomy of a person' and the right to self-determination as ethical principles in nurse education curriculum.	Standards should be put in place to guide best practice in terms of protecting vulnerable groups.
Nurse leaders and policy makers advocate for vulnerable groups supporting them in their right for self-determination.	Researchers ensure research participants; especially members of vulnerable groups are protected from exploitation during research.	
When healthcare service users are assessed as not competent to make informed decisions, systems and processes are established to ensure healthcare service users' best interests are at the centre of all decisions.	Students of the professions should be given the opportunity to critically discuss the concept of 'capability' and its application in the healthcare environment.	Guidelines for researchers should be developed with the aim of protecting individuals and vulnerable groups.

## **Statement 6.**

### **Nurses promote and preserve the trust and privilege inherent in the relationship between nurses and healthcare service users and the wider public**

The conduct of nurses both in their personal (outside work) and professional lives maintains and builds public trust and confidence in the profession. Nurses take reasonable steps to maintain a sense of trust in people receiving nursing care. They understand that vulnerable people such as children, older people, people with disabilities and people with mental illnesses must be protected from all forms of harm including exploitation.

#### **Nurses and Co-workers**

Nurses engage in professional relationships with members of the healthcare team. Such collaborative relationships are focussed on the needs of healthcare service users, for the benefit of healthcare service users, their families and the wider community. Dual relationships that extend beyond a professional capacity will almost always be deemed as unprofessional, they may compromise the standard of care being offered to healthcare service users and their families. Examples of dual relationships include romantic relationships and business relationships.

#### **Nurses and the Environment**

Nurses are accountable for making the best use of healthcare material and manpower resources to meet the needs of healthcare service users. These considerations include using the best available evidence as well as cost benefit assessments. Inappropriate use of or misappropriation of resources brings the decision making skills of nurses into question, and undermines the trust the public holds in the nursing profession.

#### **Nurses and Health Service Users / the wider public**

Nurses have a responsibility to maintain professional boundaries between themselves and healthcare service users in their care, members of their family, friends and designated representatives. Nurses also fulfil roles outside their professional lives, this includes family member, friend etc. Nurses are also aware that dual relationships in the healthcare setting may

compromise the care they offer to healthcare service users. Professional relationships must always be conducted with the intent of benefitting the healthcare service user(s) for which the relationship was intended. Relationships that do not, or no longer focus on the benefit of healthcare service users are deemed as inappropriate in most circumstances. Such relationships raise questions related to exploitation of vulnerable people due to the power differential present in the nurse – healthcare service user relationship. Consent is not seen as an acceptable defence if nurses engage in intimate behaviour with healthcare service users, their family members or designated representatives. Nurses should not be required to provide nursing care to people with whom they have had a pre-existing nonprofessional relationship. Such circumstances warrant the nurse to be reassigned to different healthcare service users.

### **Nurses and the Profession**

Nurses who act unethically in their personal lives risk adversely affecting their own and the nursing professions' good reputation and standing in the eyes of the public. These types of unethical behaviours could damage the trust held by the public in relation to the nursing profession, and therefore could also damage the therapeutic relationship between nurses and the general public. Nurses must exercise discretion and consider the ethical interests of fellow healthcare stakeholders when participating in public, political or academic debate, including publications of academic work.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Healthcare policies, procedures and standards provide checks and balances for unethical behavior and help to maintain and build the good standing of the nursing profession in the eyes of the wider public.	Healthcare students, including nursing students are given the opportunity to critically debate trust and privilege inherent in the nurse – healthcare service user relationship.	Standards should be put in place to guide best practice in terms of protecting vulnerable groups.
Nurse leaders and policy makers advocate for vulnerable groups supporting them in their right for self-determination.	Nurse educators must emphasize the importance of making appropriate ethical decisions to students of the profession. This includes avoiding acts of <u>plagiarism</u> .	Standards should be developed by the relevant regulatory authority that regulates Nurse education with view to protecting the public.
When healthcare service users are assessed as ‘not competent’ to make informed decisions, systems and processes are established to ensure healthcare service users’ best interests are at the centre of all decisions.	Students of the professions should be given the opportunity to critically discuss the concept of ethical decision making within the context of modern day healthcare environment.	Guidelines for researchers should be developed with the aim of protecting individuals and vulnerable groups from all forms of exploitation.

## **Statement 7.**

### **Nurses must act to identify and minimise risk to healthcare service users, their families and the wider public**

Nurses question and intervene to stop unsafe, uncompassionate, incompetent and unethical care, or the conditions that prevent safe and effective care from occurring. Nurses admit mistakes, taking all possible steps to minimise harm caused by adverse events to healthcare service users, their families or the wider community.

#### **Nurses and Co-workers**

Nurses collaborate with health professions colleagues, actively contributing to the development, implementation and evaluation of policies that promote healthcare service users health, reduce errors and waste and establish and maintain a culture of patient safety. Modern day healthcare requires that the healthcare professions work in collaboration to solve shared health and healthcare issues, adopting a shared approach using joined up thinking leads to better and safer patient outcomes.

In instances where a nurse's or colleague's practice performance is impaired by mental or physical illness, fatigue, substance abuse or personal circumstances practice must be reported to the person with authority to address the problem. Equally nurses that report such instances of compromised practice should be protected from retaliation or other negative consequences.

#### **Nurses and the Environment**

When errors or 'near misses' occur in the healthcare setting nurses must follow policies and procedures developed within their own healthcare context. Nurses must also ensure processes to investigate the causes of errors and near misses are in place and actively feedback into a quality improvement system. They must inform a person in authority if situations or specific problems occur in the healthcare environment that prevent them from implementing the standards discussed in this Code of ethics and professional conduct and / or nationally agreed standards.

### **Nurses and Health Service Users / the wider public**

Nurses must protect healthcare service users, their family, the public and the profession from potential harm when care appears compromised. Nurses have a duty to take action to prevent harm to patients, and to offer assistance in a caring and compassionate manner. Instances requiring urgent intervention to save lives or minimise risk require immediate attention. All instances of compromised care require the nurse to consult with a senior colleague and appropriate actions determined following an open and transparent discussion about the situation.

### **Applying the Code**

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Systems, processes, policies and procedures must be in place to prevent, detect, report, respond to, evaluate, and feedback on near misses and incidents in clinical practice.	Students of the professions must understand and be able to work within quality assurance systems built to protect patients and their families from harm.	Regulators must have in place systems and processes reflected in policies and procedures to deal with misconduct. Protecting the public must be at the route of such policies as well as preventing future recurrence.
Quality assurance systems developed around risk management must feedback into the health system to improve health systems and surrounding processes.	Students must understand and be able to contribute to a 'blame free culture' where incidents and near misses are reported openly. Educators of the professions must be able to model the types of behaviors that reflect and are embedded in a 'Blame free' culture.	Integrated systems need to be operationalized that alert international nurse regulators when nurses have been terminated on grounds of misconduct and removed from the professional register. Such arrangements protect the wider public from potential future harm and promote confidence in the regulatory system in Oman.
Policies must be put in place to protect nurses that report unsafe, incompetent, unethical, uncompassionate care from the possible retaliation or other negative consequences.	Patient safety and the requisite systems and processes that enable patient safety policies to be implemented should be central issues when selecting content for health professions education curriculum.	Regulators must support the implementation of the code of professional conduct and ethics through an awareness campaign that highlights the responsibilities of all nurses to engage in ethical, compassionate, safe and effective care.

## **Statement 8.**

### **Nurses must possess the knowledge, skills and abilities required for lawful, safe and effective practice**

Nurses are accountable to provide safe and effective, compassionate, ethical care to healthcare service users, their families and the wider community. In order to do this they must ensure their own professional knowledge and skills are up to date. This includes reflecting-on own professional practice, acknowledging gaps in knowledge and skills and seeking out professional education and training in order to meet personal and professional education and training requirements. Each individual nurse will have education and training needs based on their own self-assessment, however many education and training requirements will be shared across the profession(s). Employers are obligated to provide mandatory training to support safe and effective clinical practice.

### **Nurses and Co-workers**

Nurses work in teams with other professions to deliver patient centred safe and effective compassionate ethical care. In order to optimise the team approach to healthcare nurses should engage in inter-professional learning activities that enhance the team approach to communication and decision making and enable nurses to appreciate the contributions of other professions.

Nurses must report instances of unsafe uncompassionate, unethical care to the person designated with authority to act on such matters. Equally nurses that report such matters should be protected against retaliation or other negative consequences.

### **Nurses and the Environment**

Nurses must exercise the same ethical, compassionate, safe and effective decision making when expanding / developing services, or selecting new pieces of equipment as they do when delivering care to healthcare service users. Healthcare service user's interests must be at the centre of such decisions, where nurses demonstrate accountability in terms of cost and benefit for patient care.

## Nurses and the Profession

Nurses engage in research to enhance and further develop the knowledge base on which nursing practice is based. Nurses engaging in research activities must ensure research participants, especially vulnerable groups (for example children) are protected from all forms of exploitation. Sound ethical conduct in research enhances the quality of the research process and promotes the image of nursing, not only in the eyes of the public, but also in the eyes of other professions and academic institutions.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Service managers engage nurses in personal development planning as part of a wider appraisal system. Nurses provide evidence of personal and professional development in relation to their professional role & responsibilities.	Educators must use valid and reliable assessments of clinical competence that enable students to demonstrate successful achievement of ‘critical’ competences in clinical practice.	Introduce standards for Nursing registration including standards to be met by registrants in order to re-register and remain active on the nursing register
Develop policies and procedures that support ethical decision making when assessing the need for, planning, purchasing and evaluating additional or new resources (including material & manpower).	Seek out, assess, plan, implement & evaluate educational opportunities to enhance professional team communication and decision making through the use of Inter-professional education and teams based simulation.	Implement this code of ethics and professional conduct with clear sanctions for nurses that breach the code.
	Implement standards that guide ethical research and protect vulnerable groups.	Implement systems and processes supported by policy & procedures that govern professional misconduct, and enables nurses to be removed from the register due to professional misconduct.

## **Statement 9.**

**Nurses promote, advocate for and, protect the rights, health and safety of health service users.**

Nurses advocate for people in their care if they believe that their health is being compromised by factors beyond that person's control. Nurses also advocate for positive practice environments that maximise the quality of health outcomes for healthcare service users, nurses, and organisations in which nurses' work. Practice environments must have organisational structures, processes and resources to support safety and respect for all persons in the healthcare environment.

### **Nurses and Co-workers**

Nurses act fairly and equitably when there is competition amongst different stakeholder groups or individuals. Such undertaking requires nurses to advocate for vulnerable or disadvantaged groups or individuals (e.g. Children); they are also required to justify any actions / omissions or decisions made. In order to act as an advocate in such circumstances nurses must be able to work effectively within the multi-disciplinary team.

### **Nurses and the Environment**

Nurses advocate for fair distribution of material and manpower resources for healthcare service users in their care. This includes advocating for healthcare environments that provide sufficient physical privacy, including a designated area where discussions of a private and confidential nature could take place.

### **Nurses and Health Service Users / the wider public**

Nurses advocate for and assist healthcare service users to access the appropriate level of healthcare they require at that time. They advocate for policies and legislation that improves social conditions and promotes the fair sharing of community resources.

When nurses care for terminally ill or dying people they aim to foster comfort, alleviate suffering and advocate for relief of pain in order to support and facilitate a dignified and peaceful death.

Nurses involved in research should advocate for research participants who wish to decline to participate, or withdraw from the research study before its completion. Processes should be in

place to enable research participants to withdraw from research studies at any time without incurring any form of penalty or future disadvantage.

### **Nurses and the Profession**

During instances of impaired practice when nursing colleagues' actions or decisions are called into question nurses advocate for justice and fairness to enable instances of impaired practice to be dealt with safely and effectively. This involves identified systems and processes for dealing with such matters, and ensures those nurses involved have the opportunity for their personal perspective to be heard.

### **Applying the Code**

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Provide nursing care that is sensitive to the values, customs and beliefs of healthcare service users.	Utilize this code of ethics and professional conduct as a tool for learning and reflection in the education of students of the profession.	Guidelines for researchers should be developed with the aim of protecting individuals and vulnerable groups from all forms of exploitation.
Support ethical decision making regarding resources through the development of policies and procedures to support ethical practice.	Students of the professions should be given the opportunity to critically discuss the concept of advocacy within the context of modern day healthcare environment.	Standards should be put in place to guide best practice in terms of hearing the voices of vulnerable groups. This includes representing them when health resources are being planned, requisitioned and/or distributed.
Promote the inclusion of nurse leaders on national committees that govern the planning, requisitioning & distribution of healthcare resources.	Promote the inclusion of Nurses in ethics committees	

## **Statement 10.**

### **Nurses work with healthcare service users and the wider public to enable them to achieve their highest possible level of health and wellbeing**

Nurses work with healthcare service users, their families, representatives and the wider community to enable them to attain their highest level of health and wellbeing. This is becoming increasingly important as the emphasis shifts from secondary and tertiary healthcare services to primary healthcare with a focus on health promotion and health education.

#### **Nurses and Co-workers**

Nurses collaborate with other healthcare providers and relevant parties to maximise the health benefits of healthcare service users, their families, representatives and the wider community. Nurses recognise and respect the knowledge and skills of all contributing parties.

#### **Nurses and the Environment**

Nurses support an environment of trust that sponsors openness, encourages questioning of traditional ways of working, and supports those who speak out in good faith with concerns regarding the care offered to healthcare service users, their families, representatives and/or the wider community.

#### **Nurses and Health Service Users / the wider public**

Nurses promote health and wellness, address problems and respect healthcare service users' (or their representatives) decisions. Respect for healthcare service users' decisions does not require that nurses agree with all healthcare service user choices. When healthcare service users' choices are not beneficial, or are self-destructive nurses have an obligation to offer relevant resources and opportunities. These should enable healthcare service users to change behaviour to enable them to reach the highest level of health and wellbeing.

## Nurses and the Profession

Nurses provide positive role models to healthcare service users, nursing colleagues and the wider public in terms of Healthy lifestyle choices. Nurses advocate for their colleagues to promote healthy lifestyle choices such as a healthy diet and regular exercise.

## Applying the Code

<b>Practitioner/Manager</b>	<b>Educator/Researcher</b>	<b>Regulator</b>
Develop standards to support best evidence approaches to health promotion and health education for healthcare service users and the wider population.	Promote the utilization of research that identifies best evidence approaches to health promotion and health education.	Develop and implement standards of best practice for health promotion and health education in secondary and tertiary services as well as the primary healthcare setting.
Make opportunities to improve the health and well-being of healthcare service users and the wider population.	Engage students of the professions in projects that focus on preventative healthcare strategies.	
Develop organizational policies and procedures that promote healthy working and lifestyle for nurse and other healthcare providers.	Emphasize the importance of preventative healthcare strategies (e.g. health promotion) to combat the incidence of non-communicable diseases in all Nursing curriculum.	

## **Glossary of Terms**

**Advocate** – A person who acts or speaks on the behalf of another

**Accountable** – Being answerable for your decisions and actions

**Acts or Omissions** – To act is to take action, take steps, take measures, and take initiative. Omission relates to failure to do something, failure to fulfil a moral obligation synonymous with negligence, dereliction, forgetfulness

**Anonymity** – Not identified by name, unidentified, unknown, unspecified

**Breach** – Non-compliance with principles, standards, conduct and ethical responsibilities as described in this Code

**Capable** – Being able to understand the consequences of various options and making informed decisions about own care and treatment options

**Collaboration** – The action of working with someone (this could be a team) to produce something

**Compassionate** – The ability to convey hope and the intent to relieve suffering of another

**Competent** – The skills and abilities required for lawful, safe and effective professional practice without direct supervision

**Compromised** – To expose or make vulnerable to danger

**Confidentiality** – Ethical principle or legal right that healthcare professionals will hold secret all information related to a patient, unless that patient gives consent permitting disclosure, or disclosure is sanctioned by a court of law

**Delegate** – The assignment of authority and responsibility to another person to carry out a specific activity

**Discriminate** – The unjust or prejudicial treatment of different categories of people, especially on the grounds of race, age or sex

**Designated Representative** – A formal recognition authorised to be a delegate or agent for another

**Disclose** – to make known, to lay open to view

**Equitable** – Fair and impartial

**Dual relationship** – Any situation in which a nurse – patient therapeutic or professional relationship may be contaminated by a second relationship e.g. business, financial, romantic, relatives or marriage related

**Ethical** – Being in accordance with the rules or standards for right conduct or practice, especially the standards of a profession

**(Healthcare) Service Users** – Individuals who receive nursing care or services. This term represents patients, clients, residents, healthcare consumers

**Impaired** – Weakened, diminished or damaged

**Informed Consent** – Permission is granted with full knowledge and understanding of the possible consequences

**Inter-professional learning** - Occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care

**Intimate Behavior** - Clearly formulated adjustments of one's behavior to the expressed needs of the other person. Intimate behavior is a product of eye contact, distance, smiling and other behaviors

**Mandatory** – Compulsory, required by law or policy mandate

**Misappropriation** - The intentional, illegal use of the property or funds of another person for one's own use or other unauthorised purpose

**Mutual trust** – Mutual trust and respect are prerequisites for open communication and honest dialogue about values, goals and expectations. They require freedom of expression without fear of retribution, institutional or otherwise, and value the diversity of persons, ideas and choices differing from one's own

**Need to know basis** - Relating to a principle or policy of telling people only what is deemed necessary for them to know in order to carry out a task effectively

**Obligation** – The condition of being morally or legally bound to do something

**Performance** – The action or process of carrying out a task or function

**Preceptorship** - A registered practitioner who has been given a formal responsibility to support a newly registered practitioner or other less experienced healthcare practitioner for a fixed period of time

**Plagiarism** - The practice of taking someone else's work and/or ideas and passing them off as your own (making others believe it is your work/ideas)

**Positive Working Environment** - An environment where things are made possible, practical and easy through the provision of resources and opportunities and through effective patterns of interaction

**Privacy** – Freedom from intrusion of others into one’s private life or affairs

**Professional-boundary** – The point at which the relationship changes from professional and therapeutic to unprofessional and personal

**Reasonable** – Governed by being in accordance with reason or sound thinking, not excessive or extreme, being in the bounds of common sense

**Responsible** – A moral obligation to behave correctly, a duty to deal with something or having control over someone

**Risk** – An area of uncertainty that includes a cause, an event, and an effect.

**Sanctioned** – Given official permission or approval

**Social media** – Web based technologies that enable users to connect, communicate, and interact in real time to share and exchange information and media.

**Stakeholders** – Persons or groups that have a vested interest in nursing decisions, and the evidence that supports those decisions e.g. healthcare service users, caregivers, clinicians, researchers, professional societies / associations, policy makers and others

**Transparency** – Relates to openness, ongoing communication and public accountability

**Trustworthy** – To be relied on as honest or truthful

**Unfounded** – Having no foundation or basis in fact, synonymous with groundless, baseless, unproven

**Valid** – Being logically or factually sound, synonymous with soundness, rationality, logic, defensibility

**Voluntary** – Acting on one’s own free will, at one’s discretion, elective, non-compulsory

**Vulnerable** – A person in need of special care, support or protection, because of age, disability, or risk of abuse or neglect

## Resources

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