

Nurses' View on Observance of Patients' Rights in Critical Care Units of Educational Hospitals Affiliated with Kermanshah University of Medical Sciences, Iran in 2016

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ABSTRACT

Background: Nurses are the principal healthcare service providers in a medical system who have a critical impact on the quality of healthcare. Thus, observance of ethical standards is an effective factor for enhancing the performance of nurses in the provision of high-quality care services.

Aim: To evaluate the perspective of nurses on the observance of patients' rights in hospitals.

Methods: In the present descriptive cross-sectional study, about 165 nurses, working in the critical care units (general and cardiac) of hospitals affiliated with Kermanshah University of Medical Sciences, were selected based on census method and inclusion criteria. Data collection tools included a demographic questionnaire along with a researcher-made questionnaire on nurses' view on patients' rights" developed by Hasan Jozi Arkovazi. Data were statistically analyzed based on descriptive statistics using SPSS¹⁷.

Results: Most nurses aged 20 to 29 years old (%57.6). About 94 (%57) and 71 (%43) nurses were respectively working in GICU and CICU. Almost %90.9 of the intended nurses was aware of the patients' rights charter. According to the results, the observed mean of the total participated subjects equaled to 137.77. The rate of observance of the patients' rights charter was %84.24, as a good level, and %15.76, as a medium level, in the nursing community.

Conclusion: Iranian intended nurses had a positive view on the observance of patients' rights in the critical care units.

Keywords: Iran; Patients' Rights; Nurses; CCU.

INTRODUCTION

The history of patients' rights and its observances is as long as the history of medical science¹. Hippocrates has recurrently accentuated the patients' rights to be thoroughly observed by his students in his swearing formula². Patients' rights are one of the main principles in delineating the standards of implementing clinical governance³. The term 'rights' refers to all that is right and deserved in all languages. Accordingly, patients' rights imply what patients deserve⁴. Patients' right include the duties undertaken by a medical center for patients. In other words, patients' rights require the observance of legitimate and judicious physical, psychological, spiritual and social needs that are embodied as medical standards and regulations for which the medical team is responsible and obliged to implement and comply with them⁵. That is, the patients' rights charter infers the protection of human rights in order to maintain his dignity and respect to ensure that adequate care will be taken of his body and health in cases of sickness, particularly EMS, without any age and sex discrimination or having financial power⁶.

Given that Human is a physical, mental, social and spiritual being who has legal rights in the course of both health and sickness, which cannot be attained, supported or defended without the help of others⁷, therefore, the emphasis on the principal human rights in health cares, especially maintaining the patient's dignity as a human being, becomes important when his vulnerability exposes him to the violations and weaknesses of the health system⁸.

There has been a dramatic change in the way healthcare services are received since decades ago. Long ago, the staff of healthcare service providing organizations thought that they can make the most appropriate decision about patients without observing the patients' rights⁹. However, the conditions have been currently changed i.e. basically, the performance of hospital staff are sought by the patients and they demand their rights. Indeed, the observance of patients' rights charter is one of the most important moral responsibilities in the area of medical ethics in any society that has had a long history in the medical world¹⁰. Countries like Canada, England, America, Germany, Switzerland, Australia and Sweden have also regarded the charter of patients' rights. These countries

have prepared the charter of rights and obliged all the hospitals and healthcare centers to observe and implement it³.

One of the most sensitive and professional hospital wards is the critical care unit (general and cardiac).

Patients of GICU and CICU confront with severe conditions. Sedative drugs, used for relieving pain, anxiety and fear, can affect the patients' level consciousness and disrupt their decisions¹¹. Thus, attention to patients' rights in the CCUs should be taken into account more than ever. Therefore, with regard to the significance of this issue and insufficient studies on the observance of patients' rights in critical care units, the current research team intended to investigate the observance of patients' rights in the critical care units of the medical hospitals in the city of Kermanshah of Iran from the perspective of nurses in order to offer a clear vision for providing optimal healthcare services.

MATERIALS AND METHODS

The present descriptive cross-sectional study was conducted in the GICU and CICU of the Imam Reza (PBUH), Imam Ali (PBUH), Taleghani and Farabi hospitals in 2016. To this end, nurses who working in the aforesaid units were selected based on census method and inclusion criteria. According to Jozi Arkovazi et al. (2011), the rate of the observance of patients' rights was 70% from the patients' perspective. Consequently, the required sample size was estimated 165 subjects at 95% confidence level and maximum estimated error of 0.05 through the following formula:

$$n = \frac{z^2_{1-\alpha/2} P(1-P)}{d^2}$$

The inclusion criteria involved working in the CCUs (general and cardiac) of the intended hospitals, having at least a B.A. degree in nursing, having at least one year of work experience. The nurses who were reluctant to participate were excluded from the study.

Data collection tools included a demographic questionnaire along with a researcher-made questionnaire on "nurses' view on patients' rights" developed by Hasan Jozi Arkovazi in 2010 which was moderated and used by the researcher of the present study once permission received. The latter consisted of 34 questions whose minimum and maximum scores were respectively 1 and 5 based on Likert Scale i.e. "completely agree" got 5, "agree" got 4, "disagree" got 3, "no idea" got 2 and "completely disagree" got 1. The total observed scores ranged 34 to 79 would be concluded as weak observance, 80 to 124 as moderate observance and scores greater than 125 would be considered as good observance.

The validity and reliability of the questionnaire had already been estimated. However, the percentage of the content validity used to determine the validity of the questionnaire had not been stated. Thus, in order to determine the validity of the intended questionnaire, content validity ratio (CVR) and content validity index (CVI) were used. To this end, the questionnaires were evaluated by 10 faculty members of the school of nursing and midwifery in Shahid Beheshti University of Medical Sciences and their comments were applied to

questionnaire. The value of CVR and CVI were estimated as %98 and %98 respectively. Furthermore, test-retest method was used to estimate the reliability of the questionnaire on "observance of patients' rights" based on which the value of *r* equaled to 0.895 in the patients' community. Additionally, the questionnaires were also completed by 20 nurses. Within a 7-day interval, the questionnaires were completed again and their correlation was determined using statistical tests. Accordingly, the value of *r* was 0.82 for the whole questionnaire indicating an acceptable reliability.

Once the present research project was approved and necessary permission received from the deputy of education and deputy of postgraduate studies of the school of nursing, Shahid Beheshti University of Medical Sciences, research management of Kermanshah University of Medical Sciences and the authorities of the intended hospitals, the researcher visited the GICU and CICUs of the intended hospitals and expressed the purpose of the current research to the staff. As informed consent received from the intended subjects, the required data were collected. The researcher made the necessary arrangements with the nurses of critical care units before distributing the questionnaires to the statistical population. Afterwards, they visited the intended hospitals at 9:30 to 10:30 am as well as 4:30 to 5:30 pm when all the patients were examined and did not require any special treatment procedures. The purpose of the research was explained and the questionnaires distributed to be completed by the nurses themselves. Some nurses delivered the questionnaires once completed while some took them to their home until the next shift work. It took 5 to 10 minutes to answer the questionnaire. For sampling, the researchers visited the intended hospitals for 3 months and half from July 23, 2016 to November 07, 2016 Data analysis were performed based on descriptive statistics (e.g. descriptive indices such as mean, standard deviation etc.) using SPSS¹⁷.

RESULTS

Most nurses aged 20 to 29 years old (57.6%). About 94(57%) and 71(43%) nurses were respectively working in GICU and CICU. Regarding educational levels, about 137 nurses (83%) were nursing graduates, 27(16.6%) were nursing postgraduates and only 1 nurse (0.6%) had a PhD degree in nursing. In terms of employment status, almost half of the nurses (47.3%) were contractual employees while only 9.1% enjoyed permanent fully-stated employment. Almost half of the nurses (49.1%) had less than 5 years of work experience. Table 1 shows the amount of information that nurses participating in the study had from the patients' rights charter. Based on the results, most of the intended nurses (90.9%) were aware of the patients' rights charter while about 3% was unaware of the charter (Table 1). Amongst the mean scores of the question areas (Table 1), "receiving the optimal health care services is the right of patients" got 48.72, "necessary information should be provided to the patients appropriately and sufficiently" scored 44.90, "the patients' right of freedom of choice and decision on healthcare services should be valued and respected" got 14.95, "provision of

healthcare services should respect patients' privacy and observe principle of confidentiality" got 24.93 and "access to an efficient complaints management system is the right of patients" got 4.24. Out of the total mean scores (137.77), it can be concluded that the intended nurses had a positive view on the observance of patients' rights in both the critical care units and cardiac intensive care units (Table 1 & 2).

Table 1: Frequency distribution and percentage of nurses' awareness of patient rights charter in the GICU and CICU of the intended hospitals of Kermanshah University of Medical Sciences, 2015-2016

Informed about patient rights charter	Frequency	%age
Yes	150	90.9
No	5	3
Somehow	10	6.1
Total	165	100

Table 2: Statistical Indices of each Question Areas answered by the intended nurses

Question areas	Number of Questions	Mean	Mean Scores out of 5	SD	Min	Max.
Receiving the optimal health care services is the right of patients.	12	48.72	4.06	6.45	33	60
Necessary information should be provided to the patients appropriately and sufficiently.	11	44.90	4.08	6.54	25	55
The patients' right of freedom of choice and decision on healthcare services should be valued and respected.	4	14.95	3.73	3.05	6	20
Provision of healthcare services should respect patients privacy and observe principle of confidentiality.	6	24.93	4.15	3.02	13	30
Access to an efficient complaints management system is the right of patients.	1	4.24	4.24	0.94	1	5
Total	34	137.77	4.05	17.19	95	170

DISCUSSION

According to the results, the majority of nurses were in the age range of 20 to 29 years (57.6%) and female (63%). About 94(57%) and 71(43%) nurses were respectively working in GICU and CICU. Regarding educational levels, about 137 nurses (83%) were nursing graduates, 27(16.6%) were nursing postgraduates and only 1 nurse (0.6%) had a PhD degree in nursing. In terms of employment status, almost half of the nurses (47.3%) were contractual employees while only 9.1% enjoyed permanent fully-stated employment. Almost half of the nurses (49.1%) had less than 5 years of work experience. Based on the results, most of the intended nurses (90.9%) were aware of the patients' rights charter while about 3% was unaware of the charter.

In the present study, about 90.9% of the nurses was aware of the charter of patients' rights. Vahedian Azimi et al (2011) reported that the nurses' awareness of the charter of patients' rights was %99.8, which was consistent with the findings of the present study¹³. About 41.8% of the nurses was informed through retraining courses while 32.7% had a personal study on the charter of patients' rights. Furthermore, about 54.7% of the patients' sources of awareness was personal study.

This level of awareness may relate to the impact of formal and informal ethical trainings, environmental factors, specific workplace conditions, authorities' reminder and recommendations through the mass media. The nurses are responsible for being informed of the legal and ethical principles of their profession under any circumstances because it is the religious and professional duty and mission of every human being in all religions. In general, the results indicated that the nurses' awareness of the charter of patients' rights is at a moderate and higher level contributing to the frequent educational classes hold in the hospitals as well as implementation of clinical governance policies in the hospitals of Iran. This can be justified by the high participation of nurses in implementing this program.

According to the results of the present study, the mean score of "receiving the optimal health care services is the right of patients" was 48.72 i.e. about 75.75% of the nurses reported good observance of this item while 22.83% marked it as moderate. The mean of "necessary information should be provided to the patients appropriately and sufficiently" equaled to 44.90 i.e., about 77.27% of the nurses confirmed good observance while 22.83% marked its moderate observance. The mean of "the patients' right of freedom of choice and decision on healthcare services should be valued and respected" was 14.95 i.e., about 47.27% of the nurses rated it as good while 52.73% graded it as moderate. The mean score of "provision of healthcare

services should respect patients' privacy and observe principle of confidentiality" was 24.93 i.e. it was ranked as good and moderate respectively by 97.58% and 2.42% of nurses. Finally, the mean of "access to an efficient complaints management system is the right of patients" was equal to 4.24 i.e., about 91.52% and 8.48% of the nurses rated the compliance of the last item with good and moderate observance. Out of the total mean scores (137.77), it can be concluded that the intended nurses had a positive view on the observance of patients' rights in both the critical care units and cardiac intensive care units.

The results of the present study indicated that the observance of "receiving the optimal health care services is the right of patients" was at a good level, which was consistent with the findings of Estarki et al (2015) who reported 50.7% good observance and 46.5% moderate observance¹⁴ and Nekouei Moghaddam (2014) who found it as 15(80.5%). However, the findings of Salimi and Yarmohammadian (2006) with 30% of observance contradicted with the results of the present study¹⁶. The difference contributed to the positive impact of trainings on patients' rights in the last two years that enhanced the observance of patients' rights in the intended centers. The observance of "necessary information should be provided to the patients appropriately and sufficiently" was at a good level from the perspective of healthcare receivers. This was

in line with the findings of Sharifi et al. (2015) who reported the observance of patients' privacy at the optimal level by 77.1% and the findings of Roudi Rashtabadi et al¹⁷ who found %59.90 of optimal observance. However, the present results contradicted with the findings of Matiti and Trorey (2008) indicating dissatisfaction of a significant number of patients with their privacy in the hospitals¹⁸ and the findings of Pakrou Payravandi (2014) on the hospitals' failure to observe patients' privacy at 56.2% of the cases. These contradictory results may be due to the cultural differences and distinct methodology of the present research and the aforesaid studies.

Regarding the item of "the patients' right of freedom of choice and decision on healthcare services should be valued and respected", the results of the present study was at a good level. This was in line with the study of Nekouei Moghaddam et al (2014) who found that the optimal observance of freedom of choice and decision was 50.8%¹⁵ and Amini et al (2013) indicating moderate "freedom of choice" amongst the healthcare receivers¹. Nonetheless, the findings of Vaskouei Ashkouri (2009) on patients' rights to freedom and independence in 36% of the cases opposed to the present results.

According to the results, the item of "provision of healthcare services should respect patients' privacy and observe principle of confidentiality" had a good observance, which was consistent with the findings of Basiri Moghaddam (2014) with 74% of observance¹⁹ while inconsistent with the findings of Sharifi et al (2011) who found that the observance of this item was at a minimum level (33.8%)²⁰.

The observance level of "access to an efficient complaints management system is the right of patients" was moderate based on the results of the present study. This finding was in line with the results of Tazkari et al. (2014) indicating 42.5% of observance while opposed to the study of Baba Mahmoudi et al²¹ showing 13.20% of observance.

The total mean scores of the participants of the current study was equal to 137.77. The observance of charter of patients' rights was 84.24% i.e., good observance level, and 15.76% i.e., moderate observance level by the nurses' community. The observance of the right to respect for patients is inevitable while providing healthcare services. The nurses should provide healthcare services to the patients with respect for human values and dignity of each individual regardless of their economic and social status etc. the patients have the right to be informed of the treatment advisories sufficiently before undergoing any diagnosis or treatment. Moreover, patients should be provided with necessary information on their therapeutic diagnosis, disease prognosis and their health status. Every human being has the right to decide on what is being done on his body and health. The patients' rights are regained effectively only when they receive complete information to make a clever decision.

Vahedian Azimi et al (2011) studied the nurses' awareness of patients' right and their observance of the patients' rights in the hospitals of Mashhad. They found that 62.4%, 36.3% and 1.3% of the nurses observed the patients' rights respectively at maximum, good and minimum levels²². Furthermore, the findings of Jozi

Arkovazi et al (2010) on the "view of nurses and patients on the observance of patients' rights in the medical hospitals of Ilam University of Medical Sciences" indicated that about 70% of the nurses confirmed that the patients' rights have been observed in the hospitals²³.

The results of the present study can be used to inform health service managers and service providing staff about the patients' rights so as to take necessary actions for enhancing the observance of the patients' rights. The development of a charter of patients' rights provided to the patients, physicians, nurses and administrative staff is one of the most essential issues in healthcare centers. The public exposure of the charter of patients' rights will be highly valuable and efficient in the hospitals. It is recommended to conduct several studies to investigate and compare the views on the observance of patients' rights from the perspective of the nurses working in different wards of both public and private hospitals. The limitations of the present study included nurses' insincere responses to the questions due to their fear of being deprived of receiving the potential benefits from the aforesaid unites. Moreover, since the questionnaires were completed as a self-report, nurses might not be accurate enough in answering the questions. In order to control these limitations, the researchers attempted to provide the participants with a comforting environment and sufficient information.

CONCLUSION

The results of the present study indicated that the intended Iranian nurses had a positive view on the observance of patients' rights in the critical care units.

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