

## Patient's Rights as Perceived by Nurses and Patients

Harisa Mohamed El-Shimy, Hemat Abd Elazeem Mostafa, Marwa Hamedy Bioumey

Nursing Administration department-Faculty of Nursing- Ain Shams University.

### Abstract

**Background:** Patient's rights are an important issue for achieving quality in health care. Patient's rights are a comprehensive statement that helps patients to understand their rights and responsibilities. **The aim:** to investigate perception of the patients versus nurses regarding patient's bill of rights. **Design:** comparative descriptive study was used. **Setting:** the study conducted at Diarb Negm general hospital. **Subjects:** Two groups of subjects were included in the present study: nurses group and patients' group. **Tool:** one questionnaire sheet which includes two parts: first part was personal characteristics; and the second part was patient's bill of rights Questionnaire sheet. **Results:** the study showed that most of nurses had a positive perception toward patient's rights, also, most of patients had a positive perception toward patient's rights. **Conclusion:** the study findings showed that there is a significant difference in perception in two study group (nurses and patients) especially in the perception of general rights. **Recommendation:** the study recommended that the concept of patient's rights should be included in the undergraduate and postgraduate study in nursing. The hospital should foster patients' awareness of their rights.

**Key words:** Patient's rights, Nurses, perception.

### Introduction

A close examination of Quran and Sunna, the primary resources for Muslims, reflects the importance of human rights in Islam. In the Holy Quran, God said "Allah commands justice the doing of good, and liberality to a kin, and he forbids all shameful deeds and justice and rebellion: he instructs you, that you may receive admonition "(Quran "Al-Nahl"). Egypt is one of the countries advocating human rights and enhancing the fundamental freedoms of the human person. Consequently, many organizations related health in Egypt such as medical and nursing facilities and hospitals are working on the adoption of the quality assurance and accreditation system (Ahmed, 2010).

Rights are defined as justified claims that individuals and groups can make upon other individuals or upon society (Lachman, 2006; Mosack, 2011). Patients' bill of rights is a list of the patient's rights promulgated by the American Hospital Association; it offers some guidance and protection to patients by stating the responsibilities that hospital and its staff have towards patients and their families during hospitalization (Ghonem, 2009).

Patient's right is one of the most important factors in healthcare accreditation. An efficient healthcare system requires the active participation of both recipients of health services and health providers. (Larijani, 2014).

The patients' bill of rights as mentioned by **Rangraz, Jeddi&Rabiee, (2005)** was created to fulfill 3 major goals; the first goal is to help patients feel more confident in the health care system. The Second goal of the patients' bill of rights is to stress the importance of a strong relationship between patients and their health care providers. The last goal is to stress the key role patients play in staying healthy by laying out rights and responsibilities for all patients

### **Aim of the study**

The aim of this study is to investigate perception of the patients versus nurses regarding patient's bill of rights

### **Research Hypothesis:**

There is difference between patients and nurses perception regarding the patient's bill of rights

### **Subjects and Methods**

#### **Research design:**

Comparative descriptive design was used in this study to compare the perception of patients' rights from the point of view of patients and nurses. **Setting:** The study was conducted at Diarb Negm General Hospital. **Subjects:** Subjects include two main groups, patients and nurses: **Patients group:** this group consist of (128) patients from different wards of the hospital. **Nurses group:** Nurses working in the above mentioned setting at the time of the study were (109). (14) Of them refuse to participate and nine nurses were involved in the pilot study, and excluded from the main study sample. Subjects included in this study were (86) nurses.

#### **Tools of data collection:**

The data in this study were collected by using a questionnaire sheet designed to investigate perception of the patients and nurses regarding the patients' bill of rights

**Part 1:** this part concerned with demographic characteristics of nurses and patients. **Part 2:** this part was concerned with the patients' bill of rights and designed by the researcher based on the American Hospital Association bill of right (2012) and Egyptian Healthcare Accreditation standards (2011).

### **Scoring:**

Each item was scored from 5 to 1 for the responses from 'strongly agree' to 'strongly disagree'. For each domain the scores of the items were summed up and the total divided by the number of the items, giving a mean score. These scores were converted into a percent score. Perception of the rights was considered positive if the perception score was 60% or more and considered negative if less than 60% based on cutoff point.

### **Operational Design:**

The operational design consists of preparatory phase, pilot study and field work

#### **Preparatory phase:**

The researcher reviewed the current and past, national and international related literature using books, articles, periodicals, journals, and internet to design tool for data collection. From beginning of November, 2015 to the beginning of February, 2016

#### **Tools validation:**

The developed tool was (face and content) through seeking the opinion of five experts (faculty members) in different faculties, in the nursing administration field (Ain Shams, Helwan, and Cairo University). Necessary modifications were done related to phrasing of some statements. As regard reliability was done for each tool using Cronbach's alpha and test retest reliability. First the researcher meet the study subjects ask them to feel the questionnaire sheet then

explain the patient's bill of rights and asked the study subjects to re feel the sheet .

#### **Pilot study:**

The pilot study was carried out on 10% of nurses (9 nurses), and 10% of patients (13 patients) selected randomly from the different departments of the hospital. Those subjects were not included in the main study sample. The aim of the pilot study was to assess the clarity, feasibility and applicability of the tool, identify obstacles and problems that may be encountered during data collection and estimate the time needed to complete the tools' items. The time for filling the questionnaire was found ranged from 30-45 minutes.

#### **Field work:**

The actual fieldwork started at the beginning of May 2016, and was completed by the end of September 2016. After the official permission obtained from the director of the hospital, the researcher met the head of each department to determine the suitable time for collecting study data from the study participants. The researcher met the participant and explained the aim of the study and asked them to fill in the sheets and return them anonymously. The researcher meets the participants in the morning and afternoon shifts three hours daily. The researcher was available for any clarification and checked each sheet after filling for its completion.

#### **Administrative Design:**

Permissions for conducting the study and data collection were obtained from the director of DiarbNegrn hospital. This was done through submission of formal letter from the Dean of the Faculty of Nursing, Ain Shams University explaining the study purpose.

#### **Ethical Considerations:**

The study proposal was approved by the ethical committee at the Faculty of Nursing, Ain Shams University. Official permissions to conduct the study were secured. All participants gave their informed consent to participate in the study sample, after they were informed about the study purpose and about their rights to refuse or withdraw without giving reasons. Participants were reassured that any obtained information will be confidential, and will be used only for the purpose of the study.

#### **Statistical Design:**

Data were analyzed and tabulated using the computer Statistical Package for Social Science (SPSS) statistical software package. Data were presented using descriptive statistical in the form of frequencies and percentages for qualitative variables, means and standard deviations. Chi-square test and P value were used to estimate the statistical significant differences. Statistical significance was considered at P-value <0.05.

#### **Results:**

**Table (1):** shows that less than half (45.3%) of them has diploma in nursing, also more than two fifths (46.5%) of them had years of experience in nursing ranged between 5 - 10 years with mean  $8.6 \pm 3.4$ . In addition, more than three quarters (77.9%) of them is married. On other hand less than one third (30.2%) of staff nurses work in ICU, and majority (87.2%) of them attending training program about patient's rights.

**Table (2):** shows that slightly more than half (51.5%) of studied patients had technical institute qualification. Moreover, slightly less than four fifths (79.7%) of them were married, also slightly less than three fifths (59.4%) has 3 family numbers. In addition, slightly more than one fifths (22.7%) of them are admitted in medical

department, on other hand more than one thirds (37.5%) of studied patients are new admission.

**Table (3):** reveals that there is a statistically significant differences in sex rights out of the twelve of patient individuals' rights between staff nurses and patients in the study sample related rights to obtain information concerning diagnosis and treatment, to have privacy, to expect reasonable response to the patient request, to expect reasonable response to the patient request, to be informed of business relationship between the hospital and other internal and external stakeholders, to ask for health services in the hospital, and to accept or refuse visiting or recreation facilities.

**Table (4):** reveals that there is a statistically significant difference between perceptions of patient consent right among staff nurses and patients in the study sample except the right to consent or refuse to participate in research studies, there is no statistically significant differences.

**Table (5):** reveals that there is a statistically significant difference in two ethics out of four organization ethics between staff nurses and patients in the study sample related to organization has system to inform the patient and families of hospital services, and organization has system to inform the patient and families of the cost.

**Table (6):** reveals there is a statistically significant difference in two out of three patients' rights among staff nurses and patients in the study sample related to individuals' patient right, and patient consent.

**Table (7):** illustrates the correlation between patient rights among staff nurses. It reveals that there is a statistically significant correlation among all the patient rights among staff nurses.

**Table (8):** illustrates the correlation between patient rights among patients. It reveals that there is a statistically significant correlation among all the patient rights among patients.

**Table (1):** Socio demographic characteristic of staff nurses in the study sample (n = 86).

Items	Nurses (86)		
	No	%	
Qualification In nursing	Diploma	39	45.3
	Technical Institute	31	36.1
	Bachelor	16	18.6
Years of experience	1-	15	17.4
	5 - 10 years	40	46.5
	> 10	31	36.1
<b>Mean ± SD</b>			8.6±3.4
Marital status	Single	13	15.1
	Married	67	77.9
	Divorced	4	4.7
	Widow	2	2.3
Department	ICU	26	30.2
	Medical	14	16.3
	Female surgical	14	16.3
	Male surgical	13	15.1
	Gynecology	19	22.1
Attending training program about patient's rights	No	11	12.8
	Yes	75	87.2

**Table (2):** Socio demographic characteristic of patient in the study sample (n = 128).

Items	Patient(128)		
	No	%	
Qualification	Illiteracy	45	35.2
	Technical Institute	66	51.5
	Bachelor	17	13.3
Family number	3-	76	59.4
	5-7	43	33.6
	>7	9	7
<b>Mean ± SD</b>		4.9±1.3	
Marital stats	Single	7	5.5
	Married	102	79.7
	Divorced	3	2.3
	Widow	16	12.5
Department	ICU	28	21.9
	Medical	29	22.7
	Female surgical	28	21.9
	Male surgical	20	15.5
	Gynecology	23	18
Number of admission	0	48	37.5
	1	32	25
	2	16	12.5
	>3	32	25

**Table: (3):** Comparison between perceptions of patient individuals' right among staff nurses and patients in the study sample.

Variable	Nursing staff n=86				Patient n=128				X <sup>2</sup>	P
	Not Perceived		Perceived		Not Perceived		Perceived			
	No	%	No	%	No	%	No	%		
1. Right to considerate and respectful care.	5	5.8	81	94.2	0	0.0	128	100.0	1.57	>0.05
2. Right to obtain information concerning diagnosis and treatment.	18	20.9	68	79.1	5	3.9	123	96.1	9.10	<0.001**
3. Right to make decision regarding the plan of care.	46	53.5	40	46.5	83	64.8	45	35.2	1.77	>0.05
4. Right to have privacy.	35	40.7	51	59.3	21	16.4	107	83.6	17.47	<0.001**
5. Right to expect confidentiality of his medical information.	10	11.6	76	88.4	6	4.7	122	95.3	2.06	>0.05
6. Right to review record pertaining to his /or her medical care.	8	9.3	78	90.7	7	5.5	121	95.5	1.04	>0.05
7. Right to expect reasonable response to the patient request.	8	9.3	78	90.7	0	0.0	128	100.0	4.75	<0.05*
8. Right to be informed of business relationship between the hospital and other internal and external stakeholders.	6	7.0	80	93.0	0	0.0	128	100.0	4.15	<0.05*
9. Right to expect reasonable continuity of care.	5	5.8	81	94.2	0	0.0	128	100.0	1.57	>0.05
10. Right to ask for health services in the hospital.	25	29.1	61	70.9	4	3.1	124	96.9	36.42	<0.001**
11. Right to accept or refuse visiting or recreation facilities.	33	38.4	53	61.6	12	9.4	116	90.6	19.89	<0.001**
12. Right to defend the patient's right in the hospital.	4	4.7	82	95.3	0	0.0	128	100.0	1.01	>0.05

**Table (4):** Comparison between perceptions of patient consent right among staff nurses and patients in the study sample

Variable	Nursing staff n=86				Patient =128				X <sup>2</sup>	P
	Not Perceived		Perceived		Not Perceived		Perceived			
	No	%	No	%	No	%	No	%		
1. Right to consent or refuse to participate in research studies.	12	14.0	74	86.0	6	4.7	122	95.3	2.96	>0.05
2. Right to consent to start treatment and before operations.	13	15.1	73	84.9	1	0.8	127	99.2	11.45	<0.001**
3. Right to accept the nurse provides care.	67	77.9	19	22.1	61	47.7	67	52.3	24.35	<0.001**
4. Right to refuse treatment.	77	89.5	9	10.5	76	59.4	52	40.6	27.73	<0.001**

**Table (5):** Comparisons between perceptions of organization ethics among staff nurses and patients in the study sample.

Variable	Nursing staff n=86				Patient =128				X <sup>2</sup>	P
	Not Perceived		Perceived		Not Perceived		Perceived			
	No	%	No	%	No	%	No	%		
1. Organization has system to inform the patient and families of hospital services.	5	5.8	81	94.2	0	0.0	128	100.0	4.75	<0.05*
2. Right to be informed of policies and procedure related to his care.	4	4.7	82	95.3	0	0.0	128	100.0	1.57	>0.05
3. Organization has system to inform the patient and families of the coast.	11	12.8	75	87.2	4	3.1	124	96.9	7.98	<0.001**
4. Policies define the hospital's responsibilities regarding patient's belongings.	4	4.7	82	93.3	1	0.8	127	99.2	0.64	>0.05

**Table (6):** Comparisons between total perceptions of patients' right among staff nurses and patients in the study sample .

Variable	Nursing staff n=86				Patient =128				X <sup>2</sup>	P
	Not Perceived		Perceived		Not Perceived		Perceived			
	No	%	No	%	No	%	No	%		
Individuals patient right	31	36.0	55	64.0	7	5.5	121	94.5	35.26	<0.001**
Patient consent	71	82.6	15	17.4	94	73.4	34	26.6	5.13	<0.05*
Organization ethics	4	4.7	82	95.3	3	2.3	125	97.7	1.09	>0.05

**Table (7):** Correlation between patient rights items among staff nurses.

	Spearman's rank correlation coefficient		
	Individual rights	Patient consent	Organization ethics
individual rights			
Patient consent	0.515**		
Organization ethics	0.250**	0.329**	
Total right	0.455**	0.736**	0.941**

\*\*Correlation is significant at the 0.01 level (2-tailed).

**Table (8):** Correlation between patient rights items among patients.

	Spearman's rank correlation coefficient		
	Individual rights	Patient consent	Organization ethics
Individual rights			
Patient consent	0.484**		
Organization ethics	0.401**	0.472**	
Total right	0.644**	0.718**	0.922**

\*\*Correlation is significant at the 0.01 level (2-tailed).

### Discussion:

Patient's rights are an important issue for achieving quality in health care. Today, basic human rights are considered to be an inviolable concept, and a minimum requisite in all civilized societies. The present study showed that, the majority of staff nurses had high perception level of patient's bill of rights. This result could be attributed to that, nurses attending courses about patient's rights and the hospital interests of administration was with the patients and their rights. Similar finding was reported by **Saker, (2013)** who reported that the majority of nurses were aware about the patients' bill of rights.

According to the present study findings, the majority of patients had high perception level of patient's bill of rights. This finding may be due to the patients' bill of rights is a written document (booklet) which all patients receive upon hospital admission. This study finding is congruent with a study conducted at Riyadh, Saudi Arabia by **Halawany et al., (2016)** who mentioned that, overall mean awareness score of the participants regarding their rights was remarkably high. Also, **Plianbumroong et al., (2013)** who reported that, patients perceived their overall patients' rights at a moderate level.

Moreover, the present study revealed that there was a statistically significant differences in six rights out of the twelve of patient individuals' rights between staff nurses and patients in the study sample. In disagreements a study by **Durieux et al., (2004)** showed that both patients and healthcare providers found similar differences between providers' and patients' perception regarding 12 patient's rights especially, information disclosure, privacy and confidentiality of records, continuity of care after discharge. Also, **Parniyan et al., (2016)** found that there were a statistically significant differences in 12 patient's rights.

Furthermore, there was a statistically significant difference among staff nurses and patients in the study sample related to **patient consent**. The study revealed that, patients were higher than those of the nurses. In agreements **Mohammed et al., (2015)** who stated that, in comparisons, the scores of the patient were higher than those of the nurses related to patient consent.

Also, the present study revealed that there was a statistically significant correlation among all the patient's bill of rights among staff nurse and among the patients. The present study showed that, there was no statistically significant relation between perceptions of patients' bill of right in relation to staff nurses' socio-demographic

characteristics. In contrary a study conducted by **Abdho et al., (2015)** who mentioned that, there were statistically significant relations between perceptions of patients' rights in relation to staff nurses age, years of experience, their qualification their marital status, and attending courses.

Also, a study conducted in General Hospital at Egypt by **Saker, (2013)** revalued that, no statistically significant differences between nurses' total perception with their age, years of experience and level of education, while there was a highly statistically significant difference between nurses' total perception and attained training program about patient's rights. In addition, **Sheikhtaheri et al, (2016)** found that, knowledge of the nurses with a master's degree and those with more experience was significantly higher than others.

On other hand, there was no statistically significant relation between perceptions of patients' rights in relation to patients' socio-demographic characteristics. In congruent conducted at Iran by **Heidari et al, (2014)** who mentioned that, there was no statistically significant relation between perceptions of patients' right in relation to patients' socio-demographic characteristics. In disagreements a study conducted in Military Hospital at Pakistan by **Masood et al, (2016)** who reported that males had better awareness as compared to females, and patients' awareness improved with increasing educational status.

### **Conclusion**

In the light of the study findings, it can be concluded that The majority of nurses and patients had a positive perception regarding to patient's bill of rights. Patients' perceptions of patient's bill of rights were higher than those of the nurses. Furthermore the present study finding showed that, the highest perception level among staff nurses and patients in the study samples regarding patient's bill of rights was related to organization ethics. There was a statistically significant difference among staff nurses and

patients in the study sample related to patient consent. There was a statistically significant correlation among all the patient rights among staff nurse and among the patients. There was no statistically significant relation between perceptions of patients' right in relation to staff nurses' socio-demographic characteristics and topatients' socio-demographic characteristics.

### **Recommendation**

Based on the findings of this study, the following recommendations can be concluded:

Hospital administration should emphasize that their nurses must be aware about patient's rights through: Conducting continuing educational programs on the importance of patient's bill of rights ,A questionnaire sheet to assess nurses perception and a checklist to measure their commitment to patients' bill of rights ,The hospital must have an ethical committee that meets to discuss and make decisions on ethics and Increasing awareness about the ethics and the laws of governing practice in health, through printed materials and in service training programs.

The hospital should Increase patients awareness about their bill of rights through :Manual posters of patients' bill of rights and hospital polices showable posted everywhere in the hospital especially admission and Regular meetings with patients to discuss their rights and listen to their complaints

Further research is recommended to measure nurses commitment to patients` rights, and to measure the effect of a training program on nurses` perception of patient`s bill of rights.

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