

ATTEMPT AT THE ASSESSMENT OF THE LEVEL OF KNOWLEDGE OF THE PATIENT'S RIGHTS DEPENDING ON THE PLACE OF WORK

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Abstract

Introduction and Aim:

The partnership model of health care provides for treating the patient in compliance with the patient's legal rights (PRs), specified in numerous legal acts as well as documents without legal force such as, for instance, the Charter of the Patient's Rights. The aim of the study was to attempt to evaluate the knowledge of the patient's rights among nurses depending on their place of work.

Material and Methods:

100 female (95%) and male (5%) nurses working in the medical ward (30%), surgical ward (30%), postoperative ward (20%) and intensive therapy ward (20%) of the Independent Public Central Teaching Hospital in Warsaw. Mean age: 33 (median: 28, SD: 9.11), mean length of work: 10 (median: 4.5, SD: 10.11). Higher education: 86% of respondents. Voluntary, anonymous questionnaire survey, own questionnaire, 19 open and closed, single or multiple choice questions. Statistical analysis: STATISTICA 10.0 (Medical University of Warsaw license), nonparametric Kruskal-Wallis test, $\alpha < 0.05$.

Results:

In the study group 51% of the respondents assessed their level of knowledge of PRs as good. The Charter of the Patient's Rights was the most frequently indicated (83%) source of knowledge of PRs, over 80% of the respondents expressed the will to gain and extend their knowledge of PRs. The place of employment was of crucial importance for nursing practice regarding the provision of information on the patient's rights: the right to access to medical documentation ($p < 0.010$), the right to informed consent ($p < 0.005$), the right to information ($p < 0.048$).

Conclusions:

1. In the study group, the level of knowledge of the patient's rights was insufficient and needs being complemented irrespective of the place of work.
2. In the study group, the place of work did not have a significant impact on the level of knowledge of the patient's rights while being of essential significance for the patient's rights-related nursing practice.
3. The nursing staff studied assessed the knowledge of PRs as useful and was interested in extending their knowledge of the subject. Particular attention should therefore be given to the subject in the education of nursing students as well as in postgraduate nursing education.

Keywords: patient's rights, nursing staff, hospital wards.

1 INTRODUCTION

Every man and every patient has their rights irrespective of the race, sex, age, religion, nationality, political views, material or social status. All the rights are of universal, innate (from the moment of conception till death) as well as inalienable (an individual cannot be deprived of it) character [1, 2, 3, 4].

Article 3 Section 3 Item 4 of the Act on the patient's rights and the spokesman for the patient's rights which is effective in Poland implies that the patient is 'a person presenting with a request for the provision of health care services or making use of health care services provided by health care

services-providing entity or a medical professional' [5]. The patient's rights in Poland are embedded in the provisions of the Constitution, in particular in Chapter II which specifies the rights and duties as well as the freedom of the citizen and the man [7].

In 1998, the first Charter of the Patient's Rights, developed by the Ministry of Health and Social Welfare, was published in Poland in the form of a communiqué. In 2007, it was amended in accordance with changes made to domestic law. The Charter has a general part and a specific part. The general part containing twenty eight rights concerns patients who make use of health care services on the basis of health care services financed from public resources on the basis of the act on health care services financed from public resources of 27 August 2004 [8]

The legal act regulating the patient's rights is the act on the patient's rights and on the spokesman for the patient's rights of 6 November 2008. The act covers regulations concerning the patient's rights, the institution of the spokesman for the patient's right, standards referring to access to medical documentation, duties of entities providing the patient's rights-involving health care services as well as matters related to the infringement of patients' collective rights. The Spokesman for the patient's rights constitutes a body intended to protect the rights specified not only in the act on the patient's right and the Spokesman for the Patient's Right, patients' collective rights but also patients' rights contained in the Constitution of the Polish Republic, in ratified international documents and other normative acts [5].

In Poland, pursuant to the Act on the professions of the nurse and the midwife of 15 July 2011, nurses are obliged to respect the patient's rights. It is a nurse's duty to inform a patient about their rights; provide information on a patient's health status to their mandatory representative or a person specified by the patient; keep and make available under specified rules the medical documentation; keep the information on a patient and also their death confidential [6].

In Poland, the patient's rights are also protected by a number of ratified international agreements such as: the Convention on the Protection of Human Rights and Basic Freedoms, Convention on the Protection of Human Rights and the Dignity of the Human Being in the context of the applications of biology and medicine, European Charter of Human Rights, International Pact on Civic and Political Rights, Model of the Declaration of the Patient's Rights [2].

2 AIM OF THE STUDY

The aim of the study is to attempt to assess the knowledge of nurses with respect to the patient's rights depending on the place of their employment.

3 MATERIAL AND METHOD

The study covered 100 nurses, 100 women and 5 men. 30 respondents work in the medical ward (Group 1), 30 in the surgical ward (Group 2), 20 in the postoperative ward (Group 3) and 20 in the intensive therapy ward (Group 4) of the Independent Public Central Teaching Hospital in Warsaw. The respondents are mainly town residents (83%), with people residing in towns with a population of over 500 000 constituting the largest group (42%). 86% of respondents have higher education. The arithmetic mean age was 33 (median: 28, SD: 9.11) while the mean length of work 10 years (median: 4.5, SD: 10.11).

The research was carried out by means of a diagnostic probe method among the nursing personnel of surgical, internal medicine, anaesthesiology and intensive therapy clinics. The random employee survey based on obtaining from the respondent answers to questions given in the survey was chosen as the research technique. A survey questionnaire to be filled in independently and individually was used as it ensures privacy and anonymity of respondents as well as lowers the cost. The questionnaire included 19 (open and closed, single or multiple choice) questions aimed at determining the scope of the responding nurses knowledge about the patient's rights and their readiness to gain further knowledge with respect to the protection of patients' rights.

4 STATISTICAL ANALYSIS OF RESULTS

The data obtained in result of the survey were collected on a Microsoft Excel (Microsoft Office) sheet. The Statsoft STATISTICA 10.0 software (Medical University of Warsaw license) was used for statistical analysis. Due to the character of the analysed data (qualitative, nonparametric) and the fact

that the data did not have a normal distribution – $p > 0.05$ when analysed with the Shapiro-Wilk test, the nonparametric U Mann-Whitney statistical test was used to compare the groups depending on the place of work. The level of statistical significance of $p < 0.05$ was adopted as statistically significant.

5 RESULTS

The statistical analysis of the obtained results showed significant differences between the nurses' answers depending in the place of their employment with respect to the frequency of indicating patients' rights (right to access to medical documentation, right to an informed consent, right to information). In addition over a half of the respondents assessed the level of their knowledge of patients' rights as 'good'. Detailed results can be seen in Table 1.

Table 1. The level of knowledge of the patient's rights among nurses.

No.	Question	Answer	Ward (in %)				P
			Group 1	Group 2	Group 3	Group 4	
1.	How do you assess your knowledge of the patient's rights?	Very poor	-	-	-	-	ns
		Poor	3	-	-	-	
		Satisfactory	43	43	30	40	
		Good	47	43	60	60	
		Very good	7	13	10	-	
2.	Where did you first come across the notion of the patient's rights?	School	47	60	70	65	ns
		Work	17	23	20	25	
		Media	10	-	5	5	
		Hospital/outpatient clinic	27	17	-	5	
		Others	-	-	5	-	
3.	Please, name two basic documents concerning the patient's rights known to you.	The Charter of the Patient's Rights	83	87	80	80	ns
		Act on the patient's rights and the spokesman for the patient's rights	47	60	45	55	ns
		Constitution of the Republic of Poland	13	10	50	20	ns
4.	Please, name 5 patient's rights known to you.	the right to health care	13	10	25	10	ns
		the right to medical services	53	43	55	50	ns
		the right to privacy and respect of personal dignity	97	83	70	90	ns
		the right to religious care	37	57	20	30	ns
		the right to information	83	60	85	85	0,048
		the right to keeping of valuables in deposit	10	-	-	-	ns
		the right of access to medical documentation	27	60	25	15	0,010
		the right to die in peace and dignity	10	17	65	75	ns
		the right to personal, telephone or mail contact with people from the outside	33	20	10	25	ns
		the right to an informed consent	33	70	50	20	0,005
		the right to voicing an objection	17	17	30	15	ns
		the right to the protection of data contained in medical documentation and other information connected with the provision of health care services	23	20	30	30	ns
		I don't know.	-	-	-	-	

5.	In what year was the Act on the patient's rights and the spokesman for the patient's rights adopted?	1997	23	20	10	20	ns
		2008	47	57	55	45	
		2012	17	7	5	5	
		I don't know.	13	17	30	30	
6.	Are patients informed about their rights in your place of work?	Yes	70	67	45	100	ns
		No	13	17	25	-	
		I don't know.	17	17	30	-	

A large part of nurses is of the opinion that they are the first to inform the patient about their rights but almost the same number of respondents do not know who provides patients with this information in the wards in which they work. According to the respondents rare is a situation in which it is a doctor who does it. In addition, when the respondent groups were asked about the institution dealing with the protection of the patient's rights, 79% answered that it is the Spokesman for the Patient's Rights. The remaining respondents did not know the answer to the question.

The following questions of the questionnaire concerned the Charter of the Patient's Rights. The replies to the question where in their place of work the Charter of the Patient's Rights was showed a statistically significant difference depending on the wards the nurses worked in. Nurses from the internal medicine ward more frequently than other indicated the availability of the document in the ward nurse's room ($p < 0.001$). The greatest lack of knowledge as to where the document was available was revealed by nurses from the surgical ward ($p < 0.042$). More detailed results can be found in Table 2.

Table 2. Knowledge of the Charter of the Patient's among nurses

No.	Question	Answer	Ward (in %)				P
			Group 1	Group 2	Group 3	Group 4	
1.	Does, according to you, the Charter of the Patient's Rights contain?	The patient's rights	33	33	40	35	ns
		The patient's duties	-	-	-	-	
		The patient's rights and duties	70	67	60	65	
		I don't know	-	-	-	-	
2.	Does the Charter of the Patient's Rights apply to non-insured patients?	Yes	97	97	85	80	ns
		No	-	-	-	5	
		I don't know.	3	3	15	15	
3.	To what specialists is a referral not required in accordance with the Charter of the Patient's Rights?	Dermatology, laryngology oncology	7	7	10	-	ns
		Dermatology, surgery, Laryngology	3	-	-	-	
		Gynaecology, dentistry, psychiatry	87	97	97	100	
		I don't know	3	-	-	-	
4.	Is the Charter of the Patient's Rights commonly available to patients in your place of work?	Yes	93	90	70	100	ns
		No	7	10	15	-	
		I don't know.	-	-	15	-	
5.	Where can the Charter of the Patient's Rights be found in your place of work?	Patients' Room	7	13	20	5	ns
		Corridor	73	77	65	90	ns
		Doctors' Room	3	3	-	-	ns
		Ward Nurse's Room	20	-	15	-	0.011
		Others/ What? (nurses' staffroom)	13	10	15	5	ns
		I don't know	-	13	10	-	0.042

The intensive therapy ward nurses showed the highest level of knowledge of the Charter of the Patient's Rights and its 25 statements. Nurses from the post-operative ward seemed to be the least knowledgeable in this respect.

In addition, the majority of the respondents believe that the level of their knowledge of the patient's rights is insufficient and would like to gain further knowledge as well as express the will to extend it because it is useful. A significant majority of the nurses expressed an opinion that patients are not interested in the rights which they have as patients.

6 DISCUSSION

Polish literature on the subjects contains few publication related to the level of knowledge of the patient's rights among nurses [9, 10, 11, 12, 13] while simultaneously there is no foreign literature on the subject. No studies assessing the knowledge of nurses depending on the place of employment have been found in Polish literature. In the present discussion we used the results of research carried out among various professional groups and students of the last year of studies.

The research by Iwanowicz-Palus cover selected professional groups: doctors, nurses and midwives as well as a group of patients from health care units in the lubelskie voivodeship. The study material were 2495 respondents (1363 patients as well as 1132 health care workers). The author studied the respondents' knowledge of the patient's rights and the sources of this knowledge. According to Iwanowicz-Palus the level of knowledge of both medical personnel and patients is incomplete and heterogenous. No link was found between the age, sex, length of work and the nurses' knowledge. 96.8% of the nursing staff heard about regulations aimed at the protection of the patient's rights. Over 60% of the nurses declared good knowledge of the patient's rights and over a half of them derived their knowledge from the Charter of the Patient's Rights. The nurses' group showed the best knowledge of the patient's rights among all the groups studied. The rights most frequently listed included: the right to information (76.1%), the right to give consent or object (52.2%), the right to privacy and respect of dignity (69.9%), the right to complain (56.9%), the right to death in dignity (61.7%), the right to pastoral care (63.6%), care by close people (59.3%), personal or telephone contact with people from the outside (67.9%), access to medical documentation (55.5%) and the right to keep professional confidence (57.9%). Nurses were the only among the respondents to point to the right to refuse participation in medical demonstrations for didactic purposes (52.2%), identification of personnel (57.4%), drugs and sanitary articles (53.1%), board during hospitalization (53.1%) [9]. In our study we included nurses from different hospital wards. Like in the study by Iwanowicz-Palus, nurses listed among the rights known to them the right to privacy and respect of personal dignity (86%), the right to pastoral care (38%), the right to information (77%), the right to death in peace and dignity (36%), the right to personal, telephone or mail contact with people from the outside (23%), the right to an informed consent (45%) as well as the right to voicing an objection (19%). Also, in our study, like in the research carried out by Iwanowicz-Palus, a large part of the respondents assessed their level of knowledge as good (51%). The two studies presented can lead to a conclusion that the level of knowledge of the patient's rights among nurses is level and satisfactory.

In their study, Sobolewska et al. assessed the knowledge of the patient's rights among students of the last year of studies of selected fields at Medical University of Warsaw. The study group consisted of 194 students of the fields of: nursing, public health, medicine and pharmacy. Students of nursing showed the best knowledge of the patient's rights. However, the level of knowledge of all the respondents was assessed as insufficient. Almost all nursing students declared knowledge of the patient's rights (97.4%) and only 7.9% of them did not know the name of the document 'The Chart of the Patient's Rights'. The patient's rights most frequently listed by the group of future nurses included: the right to information (93.4%), the right to medical care (47.4%), the right to the choice of a doctor (42.1%), the right to the respect of privacy and dignity (92.1%) as well as the right to give consent or object to a medical procedure (44.7%). A numerous group of nursing students (78.9%) stated that patients should have access to medical documentation. As sources of knowledge of the patient's rights nursing students indicated information obtained in the course of studies (94.7%), including: literature (55.6%), classes (41.7%) as well as their own initiative (2.8%) [11]. Our own research shows that nurses revealed a comparable level of knowledge of the patient's rights. As many as almost 60% of all the respondents first heard about the concept of the patient's rights at school. The place of work turned out to be the second most popular source of this knowledge (21%). Comparing the results of the studies conducted by Iwanowicz-Palus and Sobolewska et al. with the results of our own research we can conclude that nurses present similar, good knowledge of the patient' rights [9, 11].

No information on research into the knowledge of the patient's rights among patients from different hospital wards has been found in either Polish or foreign literature.

The size of our study group and its selection is a limitation of our study and that is why our results cannot be treated as representative for the group of nurses in Poland nor for nurses employed in particular hospital wards. Research should be continued on a larger and more representative group of hospital nurses.

7 CONCLUSIONS

1. In the study group, the level of knowledge of the patient's rights was insufficient and needs being complemented irrespective of the place of work.
2. In the study group, the place of work did not have a significant impact on the level of knowledge of the patient's rights while being of essential significance for the patient's rights-related nursing practice.
3. The nursing staff studied assessed the knowledge of PRs as useful and was interested in extending their knowledge of the subject. Particular attention should therefore be given to the subject in the education of nursing students as well as in postgraduate nursing education.

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