Compliance of Nurses with Patients' Rights and their Awareness of Legal and Ethical Issues

Abdallah Mohamed Abd-Elraouf Rashdan (1); Mona Thabet Abd-Elbaset (2); Asmaa Farghaly Ali (3); Shereen Faiyaz Gabra (4)

1. B.Sc. faculty of Nursing- Minia University- Egypt
2. Assistant Professor of Nursing Administration, Faculty of Nursing –Minia University. Egypt
3. Lecturer of Nursing Administration, Faculty of Nursing –Minia University. Egypt

Abstract

Background: Compliance of nurses with patients' rights is a crucial human right because patients are one of the most vulnerable groups in society. The study aimed to assess nurses' compliance with patients' rights and their awareness of legal and ethical issues. Research design: A descriptive correlational research design was utilized. Setting: conducted at Liver University Hospital in Minia Governorate, Egypt. Sample: a convenient sample was included, in which the total number was (107 nurses). Tools: two tools were used: tool: a self-administered questionnaire, and Tool: nurses' awareness about the legal and ethical issues in patient care. Results: There were more than half of the studied nursing (60.9%) had compliance with patients' rights, and more than two thirds (68.2%) had fair awareness level about legal and ethical issues occurring in the care of patients. Conclusion: there was a positive statistical correlation between total score of nurses’ awareness regarding ethical issues occurring in care of patients with total score of nurses’ compliance with patient’s rights. Recommendations: implement an educational training program for nurses regarding patient's rights and ethical and legal issues

Keywords: Compliance, Legal and Ethical Issues, Nurses, Patients' Rights Awareness

Introduction

Recently, the quality of healthcare services has frequently been assessed and examined for the status of patient rights observance by the healthcare providers and healthcare service recipients. So, nurses’ knowledge about ethical issues and nurses compliance with patient rights considered being a critical factor in improving and regulating the relationship between the providers and recipients of services; it is naturally of great importance in healthcare system management (Ahmed, 2022).

As an essential principle, the collective life of human beings can only constitute a human society when human rights are respected. The health systems of different countries are essentially influential in promoting the individuals’ health quality and developing a Patients’ Rights; it is a critical approach to provide patients with their required healthcare information (Ashrafizadeh, et al. 2019).

Patients’ rights are defined as the expectations that patients have from healthcare facilities. The patient’s position in the mental-value system of healthcare providers has a great impact on how to observe ethics. It is the patient’s right to receive confidential care, to request accurate information from physicians and other caregivers about the disease diagnosis, treatment, and prognosis, and to make a decision on the continuation or termination of treatment (Wilson& Probe, 2020).

The purpose of the defining and maintain patient’s rights includes the following points: defending human rights to preserve their dignity and to ensure that in case of illness, especially in medical emergencies, they will be protected and receive medical attention regardless of their race, age, gender, and socioeconomic class (Chowdhury, et al. 2021).

Patient rights are a subset of human rights. Whereas the concept of human rights refers to minimum standards for the ways persons can expect to be treated by others, the concept of ethics refers to customary standards for the ways persons should treat others. As such, rights and ethics are usually flip sides of the same coin, and behind every ‘patient right’ is one or more ethical principles from which that right is derived (Young& Wagner, 2022).

Also, compliance of nurses with patients' rights is a crucial human right because patients are one of the most vulnerable groups in society. Adherence to patient rights is considered an important issue in the quality improvement efforts in health services and one of the main bases for defining standards of clinical services (Li & Chen, 2021). For nurses, it's important to be aware of their patients' rights; this not only can increase the patients' dignity by enabling them to participate with doctors in decision-making responsibilities but also can increase the quality of health care services, reduce costs, and decrease the length of hospital stays. Therefore, assessing patients' awareness of their rights is of utmost importance (Sookhak et al., 2019).

Accordingly, the Egyptian Ministry of Health and Population (MOHP) has launched the patient's bill of rights and incorporated it as a part of the Egyptian Hospital Accreditation standards. It has been enforced in all hospitals nationwide since 2005 (Elgujja, 2020).

Establishing clearly defined patient rights helps standardize care across healthcare fields; nursing compliance and acting according to these accepted standards to improve the quality of care encourages patients or their families to know their rights and have uniform expectations during their treatment regardless of their socioeconomic status, religious affiliation, gender, or ethnicity. Although empowering patient to take an active role in improving their health strengthen and their relationships with their healthcare providers (Moustafa, et al. 2023).

Therefore, all nurses need to be aware of patient rights; each hospital unit must explain the rights to staff, and the staff should work diligently to do their best to care for their patients to improve the quality of care (Johnstone, 2022). Commonly established rights tend to derive from a core set of ethical principles that are essential to the integrity of the nursing profession as it helps to ensure better patient care, including autonomy of the patient, beneficence, non-maleficence, (distributive) justice, patient-provider fiduciary...
(trusting) relationship, and inviolability of human life. In many situations, beliefs may directly conflict with one another. When a legal standard does not exist, it remains the obligation of the healthcare provider to prioritize these principles to achieve an acceptable outcome for the patient (Olejarczyk & Young, 2021).

Significance of the study

Nurses play a critical role while providing patient care. They are the largest component of the healthcare workforce; they spend the most time with patients in the health system and function in direct patient care with activities. So, they are in the best position to act as a liaison between patients and other different healthcare providers and hospital departments. Most patients are not aware of their rights; many do what the physician tells them to do, some do not even ask why, and many do not ask questions because they do not want to take up the doctors' or nurses' time or appear ignorant and some may not know which questions to ask (Yang, 2022).

Unfortunately, with the large number of newly graduated inexperienced nurses entering the profession, many of them are unfamiliar with dealing with ethical issues in nursing (Tengnah & Griffith, 2020). So the nurse need to understand the basics of patients' rights to protect these rights; they need to familiarize themselves with the law and legal system and have basic knowledge about the law and the legal process to ensure that their actions are consistent with legal principles, and will help to protect them from liability (Yoder-Wise, & Sportsman, 2022).

A national study entitled “practice of patient's rights among physicians and nurses in two Egyptian hospitals from patients perspectives” by Ghanem et al. (2015) who reported that only 5.0% of physicians and nurses had good practice and 42% of them had moderate practice in Alexandria Main University Hospital, while 29% of physicians and nurses in Matrouh General Hospital had moderate practice. The highest mean practice scores of patient’s rights aspects in Alexandria Main University Hospital and Matrouh General Hospital was health care and respect as human being.

An international study by Maharjan, et al. (2019) about “Awareness of Nurses on Legal and Ethical Aspects of Nursing in Selected Hospitals of Lalitpur” assessed knowledge among 168 nurses in Sumeru, Sumeru City, and Ganeshman Singh Memorial Hospital of Lalitpur district and found that overall, 59.5% of the respondents had adequate knowledge and 40.5% had inadequate knowledge of ethical and legal aspects.

Despite the achievements concerning patient rights and ethical problems in health care in Egypt, several problems persist, including the unethical behavior of some healthcare workers and the poor understanding of patient rights (Yousef & Abed, 2021). So, assessing the nurses’ awareness and compliance with patients' rights is crucial to help nurses implement patients' rights and integrate them into all aspects of their care.

Aim of the study

This study aims to assess the compliance of nurses with patients' rights and their awareness of legal and ethical issues.

Research questions

- What is the level of nurse's compliance toward patient's rights?
- What is the level of nurse's awareness about legal and ethical issues for patient care?
- Is there a relation between nurses' compliance with patient rights and their awareness of legal and ethical issues for patient care?

Subjects and Methods:

Research Design:

A descriptive correlational research design was used to achieve the aim of the current study.

Setting:

The study was conducted at Liver University Hospital in Minia city, Egypt.

Subjects

A convenient sample included nurses who worked at Liver University Hospital during the data collection period. Their total number was (107 nurses)

Data collection tools

Data were collected by using two tools as follows.

Tool (1): Self-administrated questionnaire: It included two parts:

- Part I: personal data: It was used to collect data about nurses, and it included data such as, age, gender, social status, educational level, attendance of courses about patient rights and ethical issues in nursing care, department, and years of experience.
- Part II: Nurses' compliance with patient's rights scale:

  This tool was developed by Ghosh (2013) and modified by the researcher to assess nurses’ compliance with the patient's rights. It consisted of 33 items which were grouped under six dimensions as follows: environment and safety (8 items), information and participation (6 items), protection (7 items), pain and palliative care (5 items), quality services for adults (5 items) and equality and non-discrimination (2 items).

Scoring system

The compliance of nurses with patient rights was scored by researcher observation during the three shifts as (compliance completely = two), (compliance incompletely = one), and (non-compliance with patient rights = zero); (with a minimum score was 0 and a maximum score was 66) and divided as: compliance response more than 60% (> 39.6)

And non-compliance responses less than or equal 66% ≤ 39.6)

Tool (2): Nurses' awareness of legal and ethical issues in patient care: This tool was developed by Turkmen and Savaser (2015) and modified by the researcher to assess the awareness of nurses about legal and ethical issues occurring during the care of patients. It consists of 30 items which were grouped under two dimensions as follows: nurses' knowledge regarding legal aspects and issues in the care of patients (20 items) and nurses' knowledge regarding ethical issues occurring in the care of patients (10 items), with a 3–point Likert scale ranged as (agree = 3, neutral =2, disagree =1)
Scoring system

The score was divided into three levels as follows:
- Good level of nurses' awareness of legal and ethical issues (75% and more (≥ 68%));
- Fair level of nurses' awareness of legal and ethical issues (50-74% (45 - 67)), and
- Poor level of nurses' awareness of legal and ethical issues less than 50% (< 45%)

Validity and Reliability of Tools:

Validity:

The tools were tested for face validity by a jury of 5 experts in the field of Nursing Administration from the Faculty of Nursing, Minia University. Each expert panel was asked to examine the instruments for content coverage, clarity, wording, length, format, and overall appearance. Also, the necessary modification was done by the jury panel.

Reliability:

Reliability was performed to confirm the consistency of the tools. The internal consistency was measured to identify the extent to which the items of the scales measured what it was intended to measure. Also, the scales were tested for reliability using the Cronbach alpha test, and it was for tool I = 0.941 and tool II = 0.863 which revealed good internal reliability.

Pilot study:

The pilot study was conducted for 10% of the total nurses (11 nurses) to ensure the clarity of the questions, the applicability of the tools, and the time needed to complete them and perform the required modifications according to the available resources. The main purposes of the pilot study were to test the data collection tools regarding the phrasing, the order, and the need for adding or omitting questions or items; to test the clarity, comprehensiveness, accessibility, and applicability of the study scales, and to estimate the time needed to fill the scales, which was about 15 - 20 minutes. The pilot study results indicated that the tools were applicable and didn't need changes. Pilot study was excluded from the main study sample.

Data collection procedure

An official letter was granted from the dean of the Faculty of Nursing. This letter included a brief explanation of the objectives of the study. The jury approved the tools before utilizing them to collect data for the study. The time required to fill out the questionnaires was estimated after making the pilot study. Written approval was obtained from the director of the Minia University Hospital.

Results:

Table (1): Distribution of the studied nurses according to their personal data (n= 107).

<table>
<thead>
<tr>
<th>Personal data</th>
<th>The studied nurses (n= 107)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>20 - &lt; 30</td>
<td>60</td>
</tr>
<tr>
<td>30 - &lt; 40</td>
<td>35</td>
</tr>
<tr>
<td>40 – 50</td>
<td>9</td>
</tr>
<tr>
<td>&gt; 50</td>
<td>3</td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>26.1 ± 3.9 year</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>60</td>
</tr>
<tr>
<td>Married</td>
<td>47</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>41</td>
</tr>
</tbody>
</table>
Personal data

The studied nurses (n=107)

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>66</td>
</tr>
</tbody>
</table>

Educational Qualification

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bachelor degree of nursing</td>
<td>27</td>
</tr>
<tr>
<td>Institute of Nursing</td>
<td>77</td>
</tr>
<tr>
<td>Secondary school of nursing (Diploma)</td>
<td>3</td>
</tr>
</tbody>
</table>

The department in which you work inside the hospital

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICU</td>
<td>47</td>
</tr>
<tr>
<td>Emergency</td>
<td>14</td>
</tr>
<tr>
<td>Medical</td>
<td>15</td>
</tr>
<tr>
<td>Operating room</td>
<td>14</td>
</tr>
<tr>
<td>Surgery</td>
<td>17</td>
</tr>
</tbody>
</table>

Years of experience

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-5</td>
<td>86</td>
</tr>
<tr>
<td>5-10</td>
<td>16</td>
</tr>
<tr>
<td>10-15</td>
<td>5</td>
</tr>
</tbody>
</table>

Mean ± SD: 3.9 ± 3.9

Table (1): shows that (56.1%) of nurses aged between 20-30 years, and (56.1%) of the studied nurses are single. For gender, there are (61.7%) of the studied nurses are females, regarding their educational qualifications (72%) of them have technical institute degree of nursing. Regarding department of work, (43.9%) of them work in ICU, with (80.4%) having 1-5 years of experience.

Table (2): Distribution of the studied nurses according to their pervious training about patients' rights (n= 107).

<table>
<thead>
<tr>
<th>Training</th>
<th>The studied nurses (n=107)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>33</td>
</tr>
<tr>
<td>No</td>
<td>74</td>
</tr>
</tbody>
</table>

If you attend Previous training about the rights of the patient right or his defense how many times?, (n=33)

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>One</td>
<td>23</td>
</tr>
<tr>
<td>2-3</td>
<td>8</td>
</tr>
<tr>
<td>More than 3</td>
<td>2</td>
</tr>
</tbody>
</table>

Table (2): shows that (69.2%) had not attended previous training, and from the nurses who attend training there are (69.7%) had attended previous training just once.

![Figure (1) Distribution of the studied nurses' compliance with patient's rights and its Domains (n= 107).](image)

Figure (1) reveals that nurses have high “compliance score” for all dimensions of patient rights, expect the dimension “Pain and palliative care” there are (72.90%) of nurse have “non-compliance score”. Also the figure shows that (60.7%) of the studied nursing staff have total “compliance score” with the patient's rights.

Table (3): Differences in nurses' compliance scores and its domain during the three observations (n= 107).

<table>
<thead>
<tr>
<th>Domains</th>
<th>Morning shift (1st observation)</th>
<th>evening shift (2nd observation)</th>
<th>Night shift (3rd observation)</th>
<th>Test of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean ± SD</td>
<td>Mean ± SD</td>
<td>Mean ± SD</td>
<td>One way ANOVA test</td>
</tr>
<tr>
<td>Environment and safety</td>
<td>12.7 ± 3.6</td>
<td>12.9 ± 3.4</td>
<td>9.7 ± 2.2</td>
<td>35.847</td>
</tr>
<tr>
<td>Information and participation</td>
<td>8.1 ± 3.1</td>
<td>7.7 ± 3.0</td>
<td>7.2 ± 2.2</td>
<td>15.591</td>
</tr>
<tr>
<td>Protection and privacy</td>
<td>10.2 ± 2.4</td>
<td>9.7 ± 3.3</td>
<td>8.1 ± 2.2</td>
<td>40.593</td>
</tr>
<tr>
<td>Pain and palliative care</td>
<td>5.6 ± 2.9</td>
<td>5.1 ± 2.9</td>
<td>5.0 ± 2.4</td>
<td>1.511</td>
</tr>
</tbody>
</table>
Table (3): shows that the mean scores of nurses' compliance is high during the morning shift, and evening shift, while decrease in the night shift with highly statistically significant difference between three shifts for all dimensions except the pain and palliative care dimension has no significance (P=0.222). The table also shows that the mean scores of total nurses' compliance with the patient's rights scale during the morning, evening, and night shifts are (40.1, 38.0, and 29.8 respectively) with highly statistically significant difference between three shifts (P=0.0001).

Table (4): Average mean scores of nursing staff awareness of legal and ethical issues occurring in the care of patients and its domains among studied nursing staff (n = 107).

<table>
<thead>
<tr>
<th>Items</th>
<th>No. of items</th>
<th>Min- Max</th>
<th>Average mean of nursing staff awareness (n= 107)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Mean</td>
</tr>
<tr>
<td>Nurses' knowledge regarding legal aspect and issues in the care of patients</td>
<td>20</td>
<td>20-60</td>
<td>47.1</td>
</tr>
<tr>
<td>Nurses' knowledge regarding ethical issues occurring in the care of patients</td>
<td>10</td>
<td>10-30</td>
<td>24.7</td>
</tr>
<tr>
<td>Total nurses’ awareness of legal and ethical issues occurring in the care of patients</td>
<td>30</td>
<td>30-90</td>
<td>71.8</td>
</tr>
</tbody>
</table>

Table (4): shows that the average means of nursing staff awareness were 47.1 and 24.7 regarding legal aspects and issues in the care of patients and ethical issues occurring in the care of patients, respectively. As for total nurses' awareness of legal and ethical issues occurring in the care of patients was 71.8 regarding the average mean of nursing staff awareness.

Figure (2): Distribution of the studied nurses regarding their awareness of legal and ethical issues occurring in the care of adult patients.

Figure (2) shows that 68.2% of nurses are aware of legal and ethical issues in patient care, and 27.1% have a good level.

Table (5): Correlation between nurses' compliance with patient's rights with their awareness of legal and ethical issues occurring in the care of patients and its domain (n= 107).

<table>
<thead>
<tr>
<th>Items</th>
<th>Nurses' knowledge regarding legal aspects and issues in the care of patients</th>
<th>Nurses' knowledge regarding ethical issues occurring in the care of patients</th>
<th>Nurses' awareness of legal and ethical issues occurring in the care of patients</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R</td>
<td>0.189</td>
<td>0.087</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.05</td>
<td>0.173</td>
</tr>
<tr>
<td>Environment and safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information and participation</td>
<td>R</td>
<td>0.351</td>
<td>0.131</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.001**</td>
<td>0.002**</td>
</tr>
<tr>
<td>Protection and privacy</td>
<td>R</td>
<td>0.395</td>
<td>0.229</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.001**</td>
<td>0.018**</td>
</tr>
<tr>
<td>Pain and palliative care</td>
<td>R</td>
<td>0.005</td>
<td>0.049</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.956</td>
<td>0.615</td>
</tr>
<tr>
<td>Quality services for patient</td>
<td>R</td>
<td>0.178</td>
<td>0.177</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.067</td>
<td>0.069</td>
</tr>
<tr>
<td>Equality and non-discrimination</td>
<td>R</td>
<td>0.120</td>
<td>0.131</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.219</td>
<td>0.179</td>
</tr>
<tr>
<td>Nurses' compliance with patient's rights scale</td>
<td>R</td>
<td>0.283</td>
<td>0.173</td>
</tr>
<tr>
<td></td>
<td>P- Value</td>
<td>0.003**</td>
<td>0.075</td>
</tr>
</tbody>
</table>

*Correlation is significant at the 0.05 level

Table (5): reveals a correlation between nurses' awareness regarding legal aspects and issues in the care of patients dimension with nurses compliance to patient rights dimensions “environment and safety, information and participation” and protection and privacy” (r = 0.189, P=0.05; r = 0.351, P= 0.001, and r = 0.395, P= 0.001 respectively). Also, there is a correlation between
nurses’ awareness regarding ethical issues occurring in care of patients dimension with protection and privacy dimension (r = 0.229, P=0.018).

In addition, there is a statistical positive correlation between total nurses’ awareness of legal and ethical issues occurring in the care of patients with total score of nurses’ compliance with patient's rights which (r = 0.266, P= 0.006).

Discussion:

Patient rights are a crucial human right because patients are one of the most vulnerable groups in the society. Patient rights are essential pillars to provide a good health care and to promote ethical medical practices. Therefore, adherence to patient rights is considered an important issue in the quality improvement efforts in health services, and one of the main bases for defining standards of clinical services. For patients to be aware of their own rights, this not only can increase the patients’ dignity by enabling them to participate with doctors in decision-making responsibilities, but also can increase the quality of health care services, reduce costs and decrease the length of hospital stays (Newham et al., 2021).

Rights are legal, social, or ethical principles of freedom or entitlement; that is, rights are the fundamental normative rules about what is allowed of people or owed to people according to some legal system, social convention, or ethical theory. Rights are of essential importance in such disciplines as law and ethics, especially theories of justice and deontology (Schröder, 2020).

Today in the health care setting, nursing compliance with patients’ rights during their practice builds trust and maintains a healthy relationship based on nursing professional values, ethical principles, and free from legal and ethical issues in care practice. Nurses can support and provide advocacy and compliance with patients’ rights if they are informed of these rights (Mohamed et al., 2020).

Also, health service providers must represent an institution that understands and respects the rights and responsibilities of the recipient, their families, physicians, and other caregivers; thus, a better understanding of patient rights and an awareness of what constitutes a patient's right is required. Nurses must be a source of respect and support. Thus, to prevent litigation in nursing professional practice as a result of a nurse's practice falling below acceptable standards of care and competence, as manifested by negligence, malpractice, and professional negligence (Kwame & Petrucka, 2021).

Regarding socio-demographic data, the current study result showed that more than half of nurses aged between 20-30 years with mean age 26.1 ± 3.9 years, and near to three-quarters of them had technical institute degree of nursing. For gender, there were sixty-one percent of the studied nurses females. Regarding department of work, forty-three of them work in ICU, and for the experiences by years the majority of them had from one to five years of experience.

As regards the training about the patients’ rights or defence, there were more than two-thirds of them had not attended previous training, and from the nurses who attend training there were more than two-thirds of them had attended previous training just once. From the investigator point of view this finding may be because most nurses were females with family commitments which can hinder them to attended training program or workshops; also they may have lack of time, heavy workload in their units, no availability of training program produced to them from hospital which may be the reason behind.

This result was supported with Maharjan et al. (2019) who, conducted study to assess Awareness of Nurses on Legal and Ethical Aspects of Nursing in Selected Hospitals of Lalitpur and found that highly percentage of the studied nurses not attended any training program related to this topic. While this result was contrasted with Mohamed et al. (2020) who, investigated the perception of the patients versus nurses regarding patient's bill of rights and showed that most of them attending training program about patient’s rights.

Concerning to dimensions of nursing staff compliance to patients' rights, it was observed that the nurses had high compliance score for “Environment and safety” dimension with high mean score in morning and evening shift and decrease mean score in the night shift. This result may be due to nurses’ awareness about the importance of maintaining safe environment for patient and for themselves, also they try to do their best due to their knowledge and attitudes toward safe environment for patients and for themselves.

This finding comes in line with Fälun, et al. (2019) who mentioned that nurses had high level of patient rights compliance especially to safety environment. They believed that individual factors such as nurses’ attitudes, perceptions, knowledge, and information seeking can facilitate or hinder the use of clinical practice guidelines by nurses and affect their adherence to patient-safety environment principles.

Also, Lim, et al. (2019) demonstrated that there was a significant positive correlation between nurses’ standard precaution adherence and their perceptions of patient safety management. As nurses’ perceptions of patient safety management may affect nursing activities and their compliance to safety environment.

Moreover, Vaismoradi, et al. (2020), who highlighted those nurses’ knowledge, perceptions, and attitudes influenced their adherence to patient-safety principles and majority of nurses’ compliance to patient safety environment. Nurses have multiple roles and central responsibility to keep patients safe in the complex healthcare environment.

Also, the current study revealed that more than two-thirds of nurses had compliance score for “Information and participation” dimension with high mean score in morning and evening shift and decrease mean score in the night shift. This result may be due to nurses’ knowledge and practices about the meaning of sharing patient their information and sharing them in their plan of care.

This study has agreed with Halawany et al. (2016), who studied to assess awareness, availability and perception of implementation of patients’ rights in Riyadh, Saudi Arabia and found that nurses were aware of the importance of patients’ participation in his treatment. In this regard, they emphasized the principle of patient autonomy requiring that patients have good information to be given the opportunities to choose among offering medical treatment.

Also, this result is in the same line with Yousef and Abed (2021), who investigate nurses’ versus patient's awareness about patient rights and nurses' compliance to these rights, and revealed that most nurses have high levels of awareness regarding obtaining information and participation concerning diagnosis and treatment, especially a high degree...
of awareness of the item to be protected from misinformation concerning treatment and plan of care.

Also, the current study revealed that majority of nurses had compliance score for “Protection and Privacy” dimension with high mean score in morning and evening shift and decrease mean score in the night shift. This result may be due to attitudes to maintain patient privacy and confidentiality, they work and perform their nursing care with first aim to protect their patients and maintain their privacy, as they deal with patient as a human being.

This result come in accordance with Mohamed et al. (2020), who applied study entitled "Patient’s Rights as Perceived by Nurses and Patients" and found that more than half of the studied nurses perceived patients right to have protection and privacy.

Also, the current study revealed that seventy percent of nurses had compliance score for “Quality services for patient” dimension with high mean score in morning and evening shift and decrease mean score in the night shift. This result can be as a result of nurses’ compliance to the quality assurance measures especially that the Liver hospital had quality assurance unit; this unit continuous assess and evaluates hospital staff members to their adherence to qualities measures.

This current result is matched with a study done by Kupecwicz et al. (2021), who studied to define the role and importance of patients’ rights in personalized healthcare from the perspective of nursing students in Poland, Spain and Slovakia and found that the studied nurses’ compliance with Quality services for patient right.

Moreover, the current study revealed that the majority of nurses had compliance score for “Equality and non-discrimination” dimension with high mean score in morning and evening shift and decrease mean score in the night shift. This result can be as a result of nurses’ awareness about importance of maintaining patient fairness and equity, they deal with their patient as they deal with their family members as most of nurses in Egypt deal with patient by empathy and kindness.

This result come in line with Mohamed et al. (2018), who studied awareness and practice of patient rights from a patient perspective: an insight from upper Egypt who reported that the majority of healthcare professionals show agreement about the patients’ rights to be informed and maintain patient equality

Also, this result is in the same line with Youssef et al. (2022), who applied study to determine “effect of training program on technical nursing interns’ performance regarding application of patients’ rights” and found that the studied nurses were satisfied and compliance to equality and non-discrimination after the training program.

Regarding the “Pain and palliative care” dimension; it was noted that nurses had high compliance score for all dimensions of nurses compliance to patient safety, expect the dimension “pain and palliative care” there were seventy- two percent of nurse had non-compliance sore. From the investigator point of view this result may be due to barriers to palliative care access, lack of trained palliative care providers, inadequate palliative care education and training, financial barriers; and attitudes and beliefs around palliative care among nurses. Also, this may be as a result of nurses perception toward patient care in which their first importance is to provide basic patient care than palliative care.

This result is supported with Paknejadi et al., (2019) who investigate nurses’ knowledge of palliative care and its related factors and found that the studied nurses’ non-compliance about palliative care which increased by holding in-service education and on the job retraining. However, this is disagree with this finding, Meier et al. (2011), who studied palliative care among nurses reported that only less than three-quarters of nurses were aware and adherer of the item about participating in determining the type of treatment for patient condition and provide palliative care.

Regarding total score of nurses’ compliance toward patient’s rights, it was observed that sixty percentage of nurses had compliance score to patient’s rights. From the investigator point of view these results might be attributed to the fact that the nurses’ recognition in the continuity of care is a very important tool to meet patients’ need and achieve better outcome. Also, the findings confirm that nurses adhere to patient’s rights and try to prevent complication for patients after discharge through continuing instructions and regular follow-up to the patient.

This result is in the same line with Youssef and Abed, (2021) who showed that most of them always compliance with patient’s rights. Also this result was supported with Serdar et al. (2021), who applied study to assess nursing’s and employees’ compliance toward patients' rights and its relation to patients satisfaction and observed that highly percentage of nurses have high level of compliance toward patients' rights while, less than half of nurses have moderate level of compliance toward patients' rights also none of nurses have low level of compliance toward patients' rights.

Also, this is congruent with Foud et al., (2020) who investigate nurses compliance toward patients' rights and its relation to patients satisfaction and found that there was more than half of staff nurses had high level of compliance toward patients’ rights, less than half of the sample had moderate level of compliance toward patients’ rights, also none of them were low level of compliance toward patients' rights in the three times observation.

While this result is contrasted with Sheikhtaheri et al.,(2016) who applied study to assess nurses’ knowledge and performance of the patients’ bill of rights and showed that the mean score of nurses’ knowledge of patients’ rights was little acceptable, while more experienced and educated nurses showed more knowledge about patients’ rights. However, compliance with patients’ rights by the nurses involved in the study was questionable.

Also this result is contrasted with Al-Saadi et al. (2019) who applied study entitled " Awareness of the Importance of and Adherence to Patients' Rights Among Physicians and Nurses in Oman: An analytical cross-sectional study across different levels of healthcare" and found that less than half of the studied subjects had compliance toward care and treatment while the most important domain was respect and appreciation, particularly the patients’ right to be treated with dignity.

As regard mean scores of nurses' compliance during the three observations, the current study result showed that the mean scores of nurses' compliance is high during the morning shift, and evening shift, while decrease in the night shift with highly statistically significant difference between three shifts for all dimensions except the pain and palliative care dimension has no significance.

From the investigator's point of view, this compliance level could be due to adequate knowledge and a
positive attitude toward patients' rights. Besides adequate training programs. Also, this level of compliance could be due to adequate guidance and supervision of nurses' practice in health settings by their management and evaluation of compliance system and following workplace regulations rights during morning and evening shifts, while the minority had a high level in the night shift because of lack of adequate guidance and supervision of nurses' practice in health settings.

This result is contrasted with Fouad et al., (2020), who found that the studied nurses in General Hospital had low level of compliance toward patients' rights in morning shift, also more than one-third to less than two-thirds of them had a moderate level of compliance toward patients' rights in the all shifts. In addition, Amer et al. (2021) applied a study to compare nurses' compliance with pregnant women's bill of rights in an urban and rural area in Alexandria and found that nurses' compliance with pregnant women's bill of rights was unfortunately poor in both urban settings and rural consequently, especially in night shift, and only minority of urban nurses had a good level of compliance.

Concerning studied nurses regarding awareness of legal and ethical issues occurring in the care of adult patients, the current study result showed that more than two-thirds of nurses had a fair level of awareness about legal and ethical issues in patient care, and more than one-quarter of them had a good level. This could be due to the fact that patient rights included in this domain are deemed elemental human rights and constitute a fundamental part of the treatment process.

This study is in accordance with Nejad et al. (2011) who studied nurses' awareness of patient rights in teaching hospital indicated that about two-thirds of nurses were aware of the patient’s rights to expect reasonable continuity of care. Also, the result of Mohamed et al., (2018) who found that all nurses agree about the patient’s right and had moderate level of awareness about ethical issues. This result is agreed with Fouad et al. (2020), who found that more than half of staff nurses had high awareness and compliance toward patients' rights.

This result is contrasted with Al-Abd et al. (2020), who applied a study to assess nursing awareness of ethical and legal issues in the critical care unit: recommended guidelines and showed that less than one-third of the study sample were satisfied while less than three-quarters of the study sample were unsatisfied regarding nurses’ practice, ethical and legal issues in critical care units. Also, this result disagreed with Safa and Adib Hajbagheri (2019) studied entitled " How is Nurses’ Awareness of Ethical and Legal Issues Related to Caring for Older Adults?" and observed that the level of nurses' awareness of ethical and legal issues related to caring for older adults was not satisfactory.

As regard correlation between nurses’ compliance with patient's rights with their awareness of legal and ethical issues occurring in the care of patients, the current study result revealed that there was a statistical positive correlation between total nurses’ awareness of legal and ethical issues occurring in the care of patients with total score of nurses' compliance with patient's rights. This result may be due to the nurses knowledge about ethical issues improve their compliance toward patient’s rights.

This result is in accordance with Abd El-mawgood, et al. (2018), who assess the awareness and compliance about professional ethics as perceived by nursing personnel and patients at Medical and Surgical departments at Benha University Hospital, and revealed that there was a statistical significant relation among nursing personnel awareness and their compliance regarding professional ethics. Also, this result is in accordance with Amer et al. (2021), who showed a statistically significant difference among nurses regarding the relationship between their total score of knowledge and level of compliance with patients' bill of rights.

Conclusion:
In light of the current study findings, it can be concluded that,

More than half of the studied nursing staff had high compliance regarding total compliance with patient's rights, and slightly more than two-thirds of them had fair level of total awareness of legal and ethical issues occurring in the care of patients. Additionally, there was a positive statistical correlation between total score of nurses’ awareness regarding ethical issues occurring in care of patients with total score of nurses’ compliance with patient’s rights.

Recommendations:
Based on the current study finding, the following recommendations were proposed:

- Hospital administrators should provide supportive working conditions and relationships to foster nurses’ compliance with patients' rights.
- Conduct a training program and workshop about patients’ rights that enhance patient satisfaction and palliative care.
- Provide ongoing evaluation for nurses’ compliance toward patients' rights.
- Nurses should receive training on additional pain relief methods (i.e. instead of medication).

References:
strategies to overcome. The International journal of health planning and management, 36(1), 4-12.


