



Effectiveness of the informational booklet regarding legal responsibilities of Nursing personnel in terms of knowledge: Literature review

Hamander Kumar¹ and Dr. Yogesh Yadav²

¹ Principal, Ph.D. Scholar at MVGU, Jaipur, Alwar College of Nursing, Alwar, Rajasthan, India

² Guide & Supervisor, Department of Nursing, Maharaj Vinayak Global University, Jaipur, Rajasthan, India

Abstract

The researcher aims to assess effect of the informational booklet regarding legal responsibilities of nursing personnel in terms of knowledge. The researcher searched on many literature review on the same context. Multiple databases were searched focusing of the effect of knowledge on legal responsibilities of nursing personnel.

Keywords: legal responsibility, nursing personnel, liable, statutory, standard, advance directive

Introduction

Nursing is an integral part of the health care system and nurses direct their energies towards the promotion, maintenance and restoration of health. Nurses are the second largest group of professionals working in the health care system. They play a very important role in the care of patient in hospital. Medical care of patient in a hospital emanates from the joint efforts and team work of the hospital's nursing staffs and physician.

The role of nurses has expanded rapidly within the past ten years to include expertise specialization, autonomy and accountability. The impact of health care consumer movement has been to promote increased accountability on the part of all health professional including nurses

Today's nurse practitioners must be aware of nursing standards, legal issue, legal limit, legal abilities of nursing otherwise he/ she will be first person to be penalized from the legal standpoint

Materials and methods

Best (1982), "a review of literature helps the researcher in many ways. It helps to assess what is already known, what is still unknown and untested, justify the need for its replication, and throw some light on the feasibility of the study and problems that may be encountered. It also helps to uncover promising methodology of data collection and obtaining useful information on how to increase the effectiveness of data analysis".

Abdellah and Levine (1979) ^[1], infer that a review of literature provides a basis for future investigation. It also helps to establish a comprehensive body of scientific knowledge in a professional discipline.

This chapter deals with the review of research and non-research literature related to present study. The main purpose of the present study was to assess the knowledge and practice of nursing personnel regarding legal responsibilities.

An extensive review of literature of research and non-research was done to gain knowledge of the problem area and build the foundation of study. Along with review of books and journals, an attempt was also made to review literature through internet, Medlar and Medline search.

The research Literature and Non-research Literature is further classified into following subsections

1. Literature related to Knowledge
2. Literature related to malpractice and negligence.
3. Literature related to accountability and confidentiality.
4. Literature related to patient rights.
5. Literature related to documentation.
6. Literature related to development and evaluation of informational booklet.

1. Literature related to knowledge regarding legal aspects in nursing practice

Satish Kumar (2001) ^[2] this study has a role in legal issues as patient's right is to free from hospital acquired infection during hospitalization Researcher conducted this study to assess the knowledge and practice of nursing personnel regarding hospital waste management and to seek its relationship with selected factors in a selected hospital of Jaipur Rajasthan. He found that there was a negative correlation between knowledge and practice was independent of their knowledge possessed by them. Nursing personnel knowledge of hospital waste management had a significant relationship with in-service education on hospital waste management but it was not significant with practice of nursing personnel on H.W.M and professional experience and qualification had no influence on the knowledge and practice of nursing personnel regarding hospital waste management.

Barnabas, S (2004) conducted a comparative survey on 91 nursing graduates to assess knowledge of legal responsibilities in patient care in selected Christian medical college and hospital Ludhiana.

Level of academic qualification does not influence knowledge and there was no significant difference in knowledge among nurses with varying years of experience. The in-service education does play an important role in the enhancement of knowledge. The researcher recommended that study may be replicated on large sample to assess the knowledge, practice and attitude.

Sally Austin, (2008) ^[8], the review 7 legal tips for safe Nursing practice. Most legal actions brought against nurses arise because a patient advocate claims that the nurse breached a standard of care and that the breach resulted in harm to the patient. Although your primary concern is patient safety, adhering to the seven key principles that follow will also help protect you legally monitor for and report deterioration, administer medications properly, communicate effectively, delegate responsibly, document in an accurate timely manner, know and follow facility policies and procedures, use equipment properly.

Mr. Kaur H *et al.* (2014) ^[5]. A study assessed the knowledge regarding legal responsibilities in nursing among 150 Staff Nurses in selected hospitals of Punjab, identified that 42% had good knowledge, 56% had average knowledge. It showed that there was no significant relationship between the nurses' knowledge with their age, gender, duration of clinical experience and in-service education. ($p < 0.05$). For implementation of safe and high quality nursing practice, good knowledge of legal aspects of health care is necessary. In addition to that the laws, rules, and regulations that govern the Nursing practice influence the relationship which exists between the Nurse and the patient. Many legal issues are related to health care. In this era the patients are more educated and have higher expectations of the care which they receive and are aware of their rights. The patients have a right to expect their Nurses to provide the care that is consistent with the legal standards and principles

Mr. Kumar *et al.* (2013) ^[6]. The descriptive study was thus undertaken with the objectives to identify the knowledge of the staff nurses regarding legal and ethical responsibilities in the field of psychiatric nursing at selected psychiatric centre of Jaipur, Rajasthan. Total of 30 nurses were selected conveniently and questioned using demographic sheet and Structured Knowledge Questionnaire which contains items related to law terminology, acts and ethical issues. The score thus obtained was categorized into three levels: High (46-60), Moderate (31-45) and Low (0-30). The findings of the study revealed that majority (90%) of the nurses' possess moderate level of knowledge. There was no significant association found between the knowledge with age, sex, marital status, designation of nurses, total clinical experience and in-service education while professional qualification and their psychiatric experience was significantly associated with the knowledge level of the nurses.

2. Literature related to malpractice and negligence

Demmer, Kathy A. (2000) ^[7], states that the nursing research enabled nursing staff of cardiac ICU to re-examine and discover unique elements of critical care nursing practice. By re-examining the process of patient assessment step by step, it was discovered that nurses' skilful assessments, interventions and resulting outcomes could be described with a standardized vocabulary, rating patient

outcomes. Although, patient assessment and resulting nursing interventions seemed like a highly subjective process, through this research process, the participants discovered they were using similar criteria to rate their patients. Standardized nursing language plays a role in validating the effects of nursing interventions. Standardized nursing language is essential to ensure representation of nursing care effectiveness in today's health care environments. Much more research is needed in the future to validate the use of standardized language in patient care.

Evelyn Quigley (2003) Patient safety has become a National priority. Definitions and detailed examination of the issues surrounding patient safety were presented. Ideas to create improved systems for the important issue of patient safety were explored. Health care organizations that exemplify best practices in patient safety will be rewarded by the purchasers of health care and by accreditation agencies. Nursing has a major role in leading efforts to find solutions, to advance patient safety standards. Furthermore, linking consumer needs with the clinical safety focus of the health care system has the potential to decrease the risk of malpractice and negligence.

Chris barber, *et al.* (2007) Nurse Leader, such as senior nurse managers, policy makers, academics and senior practitioner need to acknowledge that abuse by care professional exists. Nurse leaders need to be able to identify negative behavior such as professional superiority that nursing staff may have over their patients which could give response to abusive behavior. Nurse leaders need to ensure that ethical code of conduct are in place and guidelines and policies are enforced and backed up with robust disciplinary measure and procedures.

American Association of justice (2011) Medical Negligence: The Role of America's Civil Justice System in Protecting Patients' Right "We have an epidemic of medical malpractice, not of malpractice lawsuits." Tom Baker, Pennsylvania "The major problem out there is medical errors that are not compensated, rather than frivolous claims that are compensated."

Krishna Kumari Paudel Subedi, Kalpana Timalisina, Raja Laxmi Bhele. (2018) ^[11]. A cross sectional descriptive design was adopted for the study. 142 nurses were included by using purposive sampling technique. Data was collected with self-administered structured questionnaire. Descriptive statistics was used to reveal demographic information. Kruskal Wallis and Mann Whitney test were used to find out association of selected demographic variables and ethico legal aspects of nursing. Majority of participants were belonging to 20-29 years of age. More than half nurses had complete bachelor's degree and had less than 10 year's experiences. Majority of participants reported that they did not encounter any legal issues in their professional life till date. Similarly, majority of participants had average level knowledge and equate level of practice. Years of experiences and education level did not affect in knowledge level and existing practice related to ethical and legal aspect of nursing. There was no significant relationship between level of knowledge and existing practice. Nurses have average knowledge and practice on ethico legal aspects. There is positive relationship between knowledge and practice though it is not statistically significant.

3. Literature related to accountability and confidentiality

Gupta, J.V. *et al.* (2000) ^[12] a study was conducted to assess the perception and attitude of nursing sisters related to medical care activities in selected district hospitals of four states of north India. All 168 available nursing staff comprised of 135 bedside nurses and 33 nursing sisters. A questionnaire and opinionnaire were developed and circulated for assessing the nursing sisters. The findings revealed that majority of bedside nurses' perceived 'medical care' activities to be their main responsibility, rather than functions related to patient care. Though they were accountable for these non-nursing activities, 52% nurses didn't want to be free from these activities. The majority (71.9%) were accountable for breakage of equipment. Only 46% felt that their job is defined and about 50% expressed that workload is not rationalized. About 77% nurses were satisfied with their job activities.

McHugh J (2003), states that the health professionals must be familiar with regulations and statutes addressing privacy and confidentiality issues. The occupational health nurse must also be aware of specific limitations and exceptions to confidentiality. Occupational health nurses must become proactive in governmental affairs to lobby for changes to include workplace health records in future legislation. To ensure employee trust, occupational, health nurses must maintain their ethical and legal responsibility to act morally when making decisions related to confidentiality. They must be considered as important tools by which subjects enrolled in clinical studies are protected from harm. These changes will result in an overall improved quality of subject protection and data derived from such clinical studies.

Neville parker, mark Jukes (2008) ^[14] Stated that there are boundaries in all aspects of our lives ranging from prohibiting access, identifying property or defining level of appropriate behavior. Professional boundaries aim to uphold professional standard, safeguard the welfare of the public and protect the users of the service and the professional worker alike. Any relationship between a professional and the service users should be charred used by trust, respect, closeness and power.

In a study among nurses, Guix Oliver *et al.* (2010) ^[15] found the most important patient rights were "the right to information" and "patient autonomy". Patient's rights were sufficiently understood, and the right to information was valued more highly than the right to exercise autonomy. In our study, nurses also considered it important to provide good information about the medical situation to the patient and the family. Regarding patient autonomy, our nurses think that patients not only need only be informed and sign a consent for surgery, but there are many other tests, nursing procedures and clinical situations when expressed consent is required. Other issues in which implications for the law arose were when what should be done if not enough information was given to patients or if the information compromised their autonomy.

Mr. Sandeep Kaur (2017) ^[16] A Descriptive Study to Assess the Knowledge and Practice Regarding Legal and Ethical Aspects among Staff Nurses - Fifty (50) staff nurses of Civil Hospital, Phase-6, Mohali were selected by consecutive sampling as per inclusion and exclusion criteria. The data was collected from subjects by structured questionnaire, consisting of socio-bio-demographic characteristics,

questionnaire regarding legal and ethical aspects and checklist regarding practice of legal and ethical aspects related to drug administration. The study findings revealed that the mean knowledge score of subjects regarding legal and ethical aspects was 17.44 ± 4.44 and maximum mean practice score of the subjects regarding legal and ethical aspects of drug administration was 13.36 ± 1.66 . It also showed that maximum 42 (80.00%) of subjects had average level of knowledge and majority 49 (98.00%) of subjects had good level of practice. The statistical testing of knowledge and practice association revealed a moderately positive correlation. The association of knowledge and practice with various socio-bio-demographic variables (i.e., -age and professional experience) when statistically tested showed no significant association of $p > 0.05$. Whereas in the statistical testing of association of knowledge and practice with professional qualification, only practice was found to be significant at $p < 0.05$. -It was concluded that majority of subjects 41 (82.00%) had average level of knowledge regarding legal and ethical aspects with mean \pm SD of 17.44 ± 1.44 . It also revealed the mean practice score regarding legal and ethical aspects related to drug administration as 13.36 ± 1.66 and maximum 48 (96.00%) had good level of practice

4. Literature related to patients right

Volker, (2004) the experience of receiving patient requests for assistance in prematurely ending life can represent both an ethical and legal dilemma for nurses in the United States. Similarly, the study of nurses, involvement with such a sensitive topic also poses risks to the study participants, the researcher, and the profession's covenant with society. The purpose of this study as to explore methodological issues and approaches associated with studying an ethically and legally sensitive issue, and to describe the application of these approaches to a study of oncology nurses' experience with receiving requests for assisted dying from terminally ill patients with cancer.

Betty. P. Kunjumon (2006) ^[18], An exploratory study for the assessment of knowledge and practice of trained nurses in protecting the patient's rights and factors which interfere in protecting the patient's rights in selected medical college and research centre of Kochi, Kerala by using descriptive survey. She revealed that maximum (20%) number of subjects scored in the range of 61-65 and least number scored 81-85 and mean percentage knowledge score was 78% shows they have good knowledge about patient's rights. More than half (65%) have moderate level of knowledge. Only one third of subjects have high level of knowledge about patient rights. She found that majority of nurses is protecting patients-rights in their nursing practice.

Karen Sanders, Suzanne (2007) ^[19], expressed that duty of care is owed to all those for whom we care, a duty not to cause harm, to continuously aim to provide the best possible care and treatment, to act all times in the best interest of those for whom we care, this includes respecting the autonomous choice made by the person regarding the treatment of their body. Autonomy is the capacity to think, decide and action on the basis of such thought and direction, freely and independently, In other words, deliberated self-rule.

Mr. Woogara (2009) ^[20]. A qualitatively studied the aspects

of protecting the dignity and privacy of patients. This author found that many nurses were not aware of the 1998 Human Rights Act (especially the older nurses), and thus they did not implement these rights to the same degree as younger, more knowledgeable nurses. Our study had similar findings with the youngest nurses reporting more knowledge, and this knowledge was acquired in a university setting, so their background was more fundamental.

Doran, Evan, *et al.* (2014) ^[21]. Cross-sectional survey of a convenience sample of 104 medical, nursing and allied health professionals in two NSW hospitals to investigate the range, frequency and management of ethical issues encountered by clinicians working in hospitals in New South Wales (NSW), Australia. Sixty-two (59%) respondents reported occasionally to often having ethical concerns. Forty-six (44%) reported often to occasionally having legal concerns. The three most common response to concerns was: talking to colleagues (96, 91.4%); raising the issue in a group forum (68, 65%) and consulting a relevant guideline. Most respondents were highly (62%) or moderately (31%) satisfied with the ethical environment of the hospital. Twenty-two (22%) were highly satisfied with the ethical environment of their department and 74 (75%) were moderately satisfied. A majority 72 (69%) of respondents indicated that additional support in dealing with ethical issues would be helpful. Clinicians reported frequently experiencing ethical and legal uncertainty and concern. They usually managed this by talking with colleagues. While this approach was considered adequate, and the ethics of their hospital was reported to be satisfactory, the majority of respondents indicated that additional assistance with ethical and legal concerns would be helpful. Clinical ethics support should be a priority of public hospitals in NSW and elsewhere in Australia

5. Literature related to documentation and records keeping

Ramesh B. Navuluir (2003), there is no place for subjective feelings, conclusions, opinions, impressions, and suppositions in our documentation. The various purposes of clinical documentation are all best served by complete documentation. A better understanding of the different aspects of documentation can motivate nurses to become better documenters. However, a technique to analyze one's own documentation can channel that motivation into empowerment. By employing the simple invocation techniques, which involves invoking the "six honed servants" – What, Why, When, Where, Who and How and nurses can enhance their documentation skills and create complete, objective and specific documentary records about patient care.

Griffith (2004) reported that a nurse from Coventry (UK) was removed from the national register after failing to keep accurate records for patients in her care. The committee heard that she failed to ensure care plans that were prepared for several patients covering issues such as diabetes, pain management and dietary needs. The Nursing and Midwifery Council (NMC), found the nurse had systematically neglected a basic and crucial duty, to keep proper records for the management of patient care.

George Castledine. (2006) she mentioned that there is a great importance of keeping the patient's records secure and

confidential. Health care records are a tool of communication with in the team. Nurses for the patient or client are an accurate account of treatment, care planning and delivery. It should be consecutive written with the involvement of the patient or client whenever practicable and completed as soon as possible after an event has occurred. It should provide clear evidence of the care planned, the information made, the care delivered and the information shared.

A study undertaken by Dharamrajan B (2010) ^[25] explored the level of acceptance of NIS for computer generated nursing care plans in selected hospital in Bangalore, India. Thirty nurses selected by convenience sampling technique participated in the study. The tools contained a combination of Likert scale and semantic differential scale items in the areas of; ease of use; perceived usefulness; and attitude towards the NIS. Findings revealed high perceived ease of use and usefulness of NIS and favorable attitude towards computer generated nursing care 48 plans. It was concluded that nurses expressed a positive level of acceptance towards NIS in prior to its implementation

6. Literature related to development and evaluation of informational booklet

The literature related to development and evaluation of self-learning material was reviewed to acquire a clear concept about preparing a booklet for staff nurses on 'Legal Responsibilities of Nurses'.

World Health Organization (WHO) 1974, study on the selection of teaching and learning material in health science education recommended the following major criteria for the development and evaluation of teaching learning material. The following steps were suggested by the study group for validation of learning materials.

- Identification and clarification of instructional goals and objectives.
- Selection of learning activities to accomplish these goals.
- Determination of the types and number of learning materials.
- Placement of the material in proper sequence.
- Initial trial of the material using a local group of students, identical with or similar the target audience.
- Determination of the degree of learning accomplished by the students using the materials.

Alka Saxena (2014) ^[27]. A study was conducted to evaluate the effectiveness of an information booklet on legal responsibilities of nurses in terms of knowledge of staff nurses and to seek its relationship with selected factors in selected Government Hospitals of M.P. The conceptual framework of the study was based on system model. An evaluative research approach with one group pre-test post test design was utilized in the study. The systematic random sampling technique was used to obtain an adequate size of sample. The sample comprised of 50 staff nurses working in the clinical area. The tools developed and utilized for data collection were as follows: structured knowledge questionnaire to assess the knowledge level of staff nurses on legal responsibilities. The major findings of the study were the mean post-test knowledge score was significantly higher than the mean pre-test knowledge score. The post

knowledge score were found to be associated with the age and clinical experience. Besides that, professional education has not only has relationship with the post-test knowledge score. The information booklet was found to be highly acceptable by the staff nurses.

Dr. Pushpaveni NP (2015) [28] A study was undertaken to evaluate the Effectiveness of structured teaching program regarding knowledge on ethical and legal issues in nursing among staff nurses in selected hospitals at Bangalore. Pre-experimental, one group pre- test, post-test design was used. Convenient sampling method was used to select the samples. Information was collected from 50 staff nurses regarding ethical and legal issues in nursing by using the structured knowledge questionnaire. STP was implemented and post-test was conducted after 7 days to find the effectiveness. Study findings showed that pre-test knowledge scores were found to be 43.05% and after STP the posttest knowledge scores of staff nurses was found to be 77.45% which is enhanced by 34.4%. With the t-test value 25.96* and chi square value 80.18* which is significant at 5% level. Hence the result has proved that STP was effective in improving the knowledge of staff nurses on ethical and legal issues in nursing

Conclusion

Various searched studies suggested that the increased level of knowledge in nursing personnel about legal responsibilities helps to improve patient care and nursing service with highest standard.

References

1. Abdelah FG, Levine G. Better Patient Care Through Nursing Research, New York; Macmillan, 1979.
2. Satish Kumar, Rajesh, Mehta, Santosh, Kalra, Raminder, Rajesh. Knowledge of staff nurses regarding legal and ethical responsibilities in the field of psychiatric nursing. 2001 VL - JO - nursing and midwifery research journal.
3. Baranbas, Seema. 'Study to assess the knowledge of legal responsibilities in patient care among nursing graduates'. The Nursing journal of India, 2004; 95(4):90-91.
4. Sally Austin. continuing education need of registered nurses, Journal of continuing education, 2004; 13(15):23-25.
5. Kaur H, Sodhi JK, Sharma K. A Study to Assess the Knowledge Regarding Legal Responsibilities in Nursing. International Journal of Health care sciences. 2014; 2(1):50-53.
Available from: <http://www.researchpublish.com>
6. Kumar, Rajesh, Mehta, Santosh, Kalra, Raminder, Rajesh. Knowledge of staff nurses regarding legal and ethical responsibilities in the field of psychiatric nursing. 2013 VL - JO - nursing and midwifery research journal
7. Demmer, Kathy A. 'Informed consent for inserting a central venous catheter' The American Journal of Nursing, 2000; 95(6):66-68.
8. Vaughan Barbie. 'Autonomy and Accountability' Nursing Times, 2003; 85(3):54-55.
9. Bland. 'Learning needs of nurses' Nursing outlook, 2007; 20(1):4-5, 75.
10. Mohr JC. 'American Medical Malpractice Litigation in Historical perspective' Journal of American Medical association, 2011; 23(2):1731-1373.
11. Nurse's Awareness on Ethico-legal Aspects of Nursing Profession Krishna Kumari Paudel Subedi, Kalpana Timalisina, Raja Laxmi Bhele. JNHRC, 2018; 16(1):38.
12. Gupta JV, Kumar, Rajesh, Mehta, Santosh, Kalra. Knowledge of staff nurses regarding legal and ethical responsibilities in the field of psychiatric nursing. 2013 VL - JO - nursing and midwifery research journal
13. Fagin *et al.* 'Nurses duties towards patient care' The American Journal of Nursing, 2003; 98(3):42-44.
14. Neville Parker, Mark Jukes. 'Privacy and The Patient's right. American Journal of Nursing, 2008; 98(4):69-70.
15. Guix Oliver J, Fernández Ballart J, Sala Barbany J. Patients, physicians and nurses: three different points of view on the same issue. Attitudes to and perceptions of patient rights. Gac Sanit, 2010; 20(6):465-472.
16. Sandeep Kaur. A Descriptive Study to Assess the Knowledge and Practice Regarding Legal and Ethical Aspects among Staff Nurses. International Journal of Health Sciences & Research (www.ijhsr.org), 2017; 243, 7(5).
17. Anthony MK *et al.* 'Factors influencing outcomes after delegation to unlicensed assistive personnel'. Journal of Nursing Administration, 2002; 12(3):474-481.
18. Betty P, Kunjumon, Study for the knowledge and practice of trained nurses regarding patient's rights. The nursing journal of India, 2006; 97(10):223-224.
19. Karan Sanders, Suzanne *et al.* 'Autonomy and care; respecting the wishes of the deceased patient' British journal of nursing, 2007; 16(6):360-361.
20. Woogara J. Patients' rights to privacy and dignity in the NHS. Nurs Stand. 2009; 19:33-3.
21. Doran, Evan, *et al.* "Managing ethical issues in patient care and the need for clinical ethics support." Australian Health Review (2014)] is available online at http://www.publish.csiro.au/view/journals/dsp_journals_pip_abstract_scholar1.cfm?nid=270&pip=A_H14034
22. Paul Prema. 'Study to assess the knowledge of nurses regarding legal responsibilities and to seek its relationship with selected factors. The nursing journal of India. 2003; 98(9):1-4.
23. Fox DJ. Fundamental of Research in Nursing ,4th edition, New York: Appleton Century Crofts, 1983.
24. Garrett, Henry E. Statistics in Psychology and Education, 10th edition, Bombay: Vakils, Feffers and Simons Limited, 1981.

25. Dharamrajan B. Responsibilities of psychiatrists: Need for pragmatic idealism. *Indian J Psychiatry* 2010; 48:211-4.
26. Bye, continuing education need of registered nurses, *Journal of continuing education*, 1988; 13(15):23-25.
27. Effectiveness of Information Booklet on Legal Responsibilities of Nurses Sarika Saxena 2014, Alka Saxena. Vice Principal, School of Nursing Science & Research, Sharda University, India.
28. Effectiveness of structured teaching program regarding knowledge on ethical and legal issues in nursing among staff nurses working in selected hospitals at Bangalore. 2015. Dr. Pushpaveni NP Professor, Department of OBG, Government College of Nursing, Fort, Bangalore, Karnataka, India