Instructional Program on Legal Aspect: Registered Nurse’s Knowledge & Attitude

Abstract:

Introduction: Nurse’s think it important that people’s rights should be protected and respected; they sometimes express concern at the difficulties of doing so.

Objectives: Objectives of the study were to assess the level of knowledge & attitude on legal aspect, to find the effectiveness of the teaching programme and to find the association between knowledge scores and selected variables.

Methodology: An evaluative study of instructional program on knowledge and attitude regarding legal aspect in health care among 53 registered nurses working in selected hospitals of Udupi district, Karnataka state. Sample were selected by non-probability purposive sampling. Data were collected by demographic proforma, knowledge questionnaire and attitude scale.

Results: The result showed majority of them i.e.39 (73.6%) had no in-service education on legal aspects in health care. In the pre test most of the participant i.e.32 out of 53 (60.4%) had poor knowledge whereas in the post test 10 (18.9%) had poor knowledge. Hence a reinforcement class was given where none of them had poor knowledge. There was significant difference between the median of pre test and post test knowledge scores of staff nurses (11, 14) (Z value= -5.891, ‘p’ value= 0.0001). Hence it is inferred that the instructional program on legal aspect in health care was effective in improving the knowledge of the staff nurses. All the participants had favourable attitude in the both pre test and post test. There was no significant association between pre test knowledge and selected variables.

Conclusion: The study showed significant increase in knowledge of participants after the instructional program. There is great need in service education on legal aspect among registered nurses in health care sector..

Key Words: Instructional program; Knowledge; Attitude; Legal Aspect; Registered Nurse; Health Care

Introduction

Healthcare is one of India’s largest sectors, in terms of revenue and employment, and the sector is expanding rapidly. Health care delivery system has grown into an industry today and health service consumers are better informed than in the past about health and illness. As consumers have become more aware of their rights, conflicts between patients, health care professionals and institutions have developed. Much of it is influenced by the Consumer Protection Act enacted by the Parliament in 1986. Nursing is affected by this kind of situation in which nurses are expected to answer questions, explain procedures and respect the rights and
requests of the patients. When nurses discuss people’s rights they often have ambivalent attitudes. Although they think it important that rights should be protected and respected, they sometimes express concern at the difficulties of doing so.

Barnabas S (2004) conducted a study to assess knowledge of legal responsibilities in patient care among nursing graduates revealed that overall knowledge of legal responsibilities was good in the areas that were directly related to patient care i.e., fundamental duties, safe environment, maintaining professional confidence, negligence and admission, transfer discharge and property (ATDP) though they need a well-conceived education program on specific areas of legal aspects such as legal terms, basic rights, legal control and medico-legal cases because their knowledge was low in these areas.

Knowledge of the legal and ethical framework guiding practice is now regarded as an essential component of nurse education and development. It is important to note that a nurse’s role is not just about performing particular tasks but also about issues such as competence and maintaining appropriate standards of care. This is confirmed in the International Council of Nurses Code (ICN), which states that nurses must maintain and improve their professional knowledge and competence.

Hence, it is important to assess the effectiveness of instructional program on knowledge and attitude on legal aspects in health care among registered nurses. This will help the nurse, develop an understanding of the legal issues related to their clients and of themselves, promote these rights in their daily work and know what to do when they are infringed and the institution to identify the need of legal aspects for the in- service education programs periodically.

This study was conducted in Kasturba Hospital (KH), Manipal Karnataka state, India with a capacity of 1,612 beds. The nursing team in this hospital is led by one Nursing Superintendent and seven area nursing supervisors and 582 staff nurses. The hospital also imparts continuing nursing education with a fulltime nurse educator. Apart from this hospital has appointed a Legal Advisor form Manipal University.

Therefore, a study was conducted to assess knowledge and attitude on legal aspect among registered nurses and also to find out the effectiveness of instructional program on knowledge and attitude regarding legal aspect in health care among registered nurses.

Conceptual Framework

Conceptual models are deductive system of proposition that assert and explain a relationship among concepts. This study aimed at assessing the knowledge and attitude regarding the legal aspects in health care among registered nurses. The framework used here was based on ‘systems model’ and has three phases- input, process, and output.

Methodology

The study was an evaluative approach with one group pre test and post test design with 53 registered nurses from Kasturba Hospital, Manipal. The variables in the study includes instructional program as independent variable whereas dependent
variable was knowledge and attitude. The extraneous variable of the study were gender, academic and professional education, years of experience, area of work, exposure to in-service education. The tools prepared for data collection were; demographic proforma, structured knowledge questionnaire on legal aspect in health care, The contents areas included were; legal terms, regulation of nursing practice in India, patient care issues, medications, injuries, documentation, issues to telephone orders, disagreement with doctor, ethical committee in hospital responsibility on standard of care, counting of sponges, needles and instruments and, informed consent. There were total 21 items. The scoring and interpretation was done arbitrarily as; <50% (0-11) poor, < 51% >75% (12-16) good, < 75% (17-21) excellent and the possible maximum score was 21 and the minimum score was 0.

The structured attitude scale was developed by researcher to assess the attitude of importance of legal aspect in health care. The tool had 13 items (7 positive and 6 negative questions) which is rated as strongly agree, agree and disagree. In a positive question; strongly agree, agree and disagree were given score of 3, 2, 1 respectively and vice versa for negative question. The possible maximum score was 39 and the minimum score was13. The interpretation was arbitrarily graded as; 24- 39 (61.5- 100 %) favourable attitude, 20- 23 (51.2- 59 %) neutral attitude, 13-19 (49%) unfavourable attitude. The instructional program based on review of research and non research literature on legal aspect in health care included the lesson plan with power point slides presentation, illustration on documentation.

Though random sampling was planned to select sample but only 53 samples attended the instructional programme session, therefore the sampling has become non- probability purposive sampling.

Content validity was done & tools were corrected accordingly. Reliability co-efficient of the knowledge questionnaire was 0.87 by spit- half method and reliability of the attitude scale was done by the Cronbach alpha formula (r = 0.867).

The pre- test was done on 16th Feb 2009 and instructional session was carried out. Post test was done on 23rd Feb 2009. Data was analyzed based on the objectives using descriptive and inferential statistics.

### Results

| Sl. No | Sample characteristics                                      | f  | %  |
|--------|-------------------------------------------------------------|----|----|
| 1.     | Gender                                                      |    |    |
|        | Female                                                      | 53 | 100|
| 2.     | Education:                                                  |    |    |
|        | A. Academic Qualification                                  |    |    |
|        | 1. PUC                                                      | 50 | 94.3|
|        | 2. Graduate                                                 | 3  | 5.7 |
|        | B. Professional qualification                               |    |    |
|        | 1. General nursing and midwifery                            | 51 | 96.3|
|        | 2. Graduation in nursing                                    | 2  | 3.8 |
| 3.     | Area of work                                                |    |    |
|        | A. Medical- surgical                                        | 38 | 71.7|
|        | B. Psychiatry                                               | 1  | 1.9 |
|        | C. Pediatrics                                               | 4  | 7.5 |
|        | D. Obstetrics and gynecology                                | 4  | 7.5 |
|        | E. Special wards                                            | 6  | 11.3|
| 4.     | Years of experience                                         |    |    |
|        | A. Less than 10 years                                       | 18 | 34  |
|        | B. More than 10 years                                       | 35 | 66  |
| 5.a)   | In-service education (e.g. workshop) on legal aspect in health care attended |    |    |
|        | A. Yes                                                      | 14 | 26.4|
|        | B. No                                                       | 39 | 73.6|
| 5.b)   | If yes, how many:                                           |    |    |
|        | A. One                                                      | 10 | 71.4|
|        | B. two                                                      | 4  | 28.6|

Table 1 denotes that all the participants were females staff nurses and 50 (94.3%) had academic qualification of PUC. Majority (90.6%) had completed general nursing and midwifery and most of them (71.7%) were working in medical and surgical wards. Most of the staff nurses (66%) had more than 10 years of working experience and majority of them (73.6%) had no in-service education on legal aspects in health care.

In the pre test 21 out of 53 (39.6%) had good knowledge whereas in the posttest most of them 32 (60.4%) had good knowledge and a few of them i.e. 11 (20.8%) had excellent knowledge. In the pretest most of the participant i.e.32 out of 53 (60.4%) had poor knowledge whereas in the posttest 10 (18.9%) had poor knowledge. Hence a reinforcement class was given
where none of them had poor knowledge. For the analysis only post test knowledge score was taken. All the participants had favorable attitude in the both pre test and post test. Hence no further statistical calculation was done for attitude in the study.

The computed Kolmogorov-Smirnov for normality was not significant. As the data did not follow normality, non-parametric test i.e. Wilcoxon signed rank test was used. The analysis was done in order to find the significant difference between mean of pre test and post test knowledge scores of staff nurses on legal aspects in health care for which null hypothesis was stated as $H_{01}$. There will not be significant difference between mean pretest and post test knowledge scores.

Table 2: Median, inter quartile range, Z value and ‘p’ value for the pre test and post test knowledge scores

| Knowledge Score | Median | Inter quartile range | Z-value | p value | Level of significance |
|-----------------|--------|----------------------|---------|---------|-----------------------|
|                 | Q1     | Q3                   |         |         |                       |
| Pre- test       | 11     | 9.5                  | -5.891  | 0.001   | Significant           |
| Post- test      | 14     | 12                   |         |         |                       |

0.05 level of Significance

The result indicates in table 2 that the median of post test knowledge score was more than the pretest knowledge score of staff nurses. The Z value obtained was -5.891 with P value of 0.0001 which is significant. Hence the null hypothesis $H_{01}$ was rejected and it was inferred that the instructional program on legal aspect in health care was effective in improving the knowledge of the staff nurses.

Table 3: Pre test, post test, actual and modified gain scores of knowledge of legal aspects in health care

| Knowledge | Mean percentage score | Actual Gain (%) | Modified Gain |
|-----------|-----------------------|-----------------|---------------|
| Pre- test | 51.67                 | 16.33           | 0.53          |
| Post- test| 68                    |                 |               |

Table 3 shows that the post test mean percentage score (68) was more than the pre test mean percentage score (51.67) which indicates that there is consistent increase in mean percentage score of knowledge of legal aspect on health care. The modified gain is 0.53. Hence it is inferred that the increase in knowledge is actual and not by chance.

To determine the association between pre test knowledge scores and professional education, years of experience, exposure to in-service education on legal aspects the chi-square statistics was computed and the null hypothesis stated as $H_{02}$. There is no significant association between pre test knowledge and professional education, years of experience, exposure to in-service education on legal aspects.

Table 4: Chi-square values computed pre test knowledge scores and selected variables

| Sl. No | Variables                        | Pre-test knowledge category | Chi-square (df) | 'p' value |
|--------|----------------------------------|----------------------------|----------------|----------|
| 1.     | Professional education           | A. General nursing and midwifery | 31 20          | 0.094*   | 0.525    |
|        | B. BSc (N)                       | 1 1                        |                |          |
| 2.     | Exposure to in-service education | A. Yes                      | 7 7            | 0.856*   | 0.359    |
|        | B. No                            | 25 14                      |                |          |
| 3.     | Years of experience              | A. Less than 10 years      | 13 5           | 1.599*   | 0.210    |
|        | B. More than 11 years            | 19 16                      |                |          |

* significant at 0.05 level of significance

Table 4 shows that in the pretest out of fourteen staff nurses who had previous exposure to in-service education to legal aspects only seven staff nurses had good knowledge. The chi-square value obtained was 0.856 with a ‘p’ value of 0.359 which was not significant. The findings also showed that out of 35 staff nurses, most of the nurses (16) who had more than 11 years of experience had good pretest knowledge, whereas out of 18 staff nurses who had less than 10 years of experience, only 5 staff nurses had good pretest knowledge. The chi-square value obtained was 1.599 with a ‘p’ value of 0.210 which was statistically not significant. Thus there was no significant
association between pre test knowledge and professional education, years of experience, exposure to in-service education on legal aspects. Hence the H02 null hypothesis was accepted, that pretest knowledge was independent of selected variables.

Besides this, The Area Nursing Supervisors of the different zones expressed the need of periodic class updates on legal aspects especially for the new staff nurses. And those who were not able to attend the program on the due date expressed their interest to know about legal aspects.

Discussion

The study findings have been discussed in term of objectives, hypotheses stated and other research findings.

In the present study, there was significant difference between the median of pre test and post test knowledge scores of staff nurses. The Z value obtained was -5.891 with P value of 0.0001 which was significant. Hence it is inferred that the instructional program on legal aspect in health care was effective in improving the knowledge of the staff nurses.

This result is supported by the study conducted by Berarducci A, Lengacher CA and Kellar R (2002) conducted a study to assess the effectiveness of an educational program on osteoporosis-related knowledge and attitude among 81 RNs’ in South West Florida. The study participants were RNs’ who were evaluated by 22 knowledge questionnaire focusing the disease and preventive behaviors. The result revealed significantly higher (t=15.1, p= 0000) osteoporosis knowledge at posttest (mean= 20.02, SD= 1.65) compared to pretest (mean= 13.5, SD= 3.33) by paired-sample t test.6

In the present study, there was no significant association between pre test knowledge and professional education, years of experience, exposure to in-service education on legal aspects. This result is supported by a study conducted by Barnabas S (2004) to assess knowledge of legal responsibilities in patient care among nursing graduates using descriptive comparative approach. Study reveals that level of academic qualification does not influence knowledge of legal responsibility, though the mean scores of Diploma and B.Sc. (N) graduates in the (B.A. / B.Sc. pass) category was higher (50.44 & 53.50 respectively) as compared to 10+2pass (47.48and 49.79 respectively). There was no significant difference in knowledge of legal responsibilities among nurses with varying years of experience. The In-service education plays an important role in the enhancement of knowledge. But the relationship of LRKS (legal responsibilities knowledge score) with In-service education was not statistically significant because a full-fledged program is not there for the graduates while in service.4

Conclusion

The findings depicts that most of the participants had poor knowledge on legal aspects in health care in the pre test. All the participants had favorable attitude on legal aspects in health care both in the pre test and post test. The pre test knowledge score was not associated with professional education, years of experience and exposure to in-service education. The study showed significant increase in knowledge of participants after the instructional program.

Recommendation

The similar study can be carried out in larger sample for generalization. Comparative study can be done on similar topic among different health care givers.

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Ethical Consideration

The Formal permission was taken from the concerned hospital.
Verbal and written consents were taken from all respondents before data collection.

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