Effectiveness of information booklet on the knowledge of psychiatric nurses regarding legal responsibilities about patient care at selected mental hospital

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Abstract

Nursing is an integral part of the health care system and Nurse’s direct their energies towards the promotion, maintenance and restoration of health. A quasi experimental, with single group pretest post test design was used to assess the existing knowledge and improvement after providing information booklet was carried out among 60 staff Nurse’s. The total mean score was 19.28. this shows that the knowledge deficit is around 50%.

Keywords: Legal responsibilities, Psychiatric Nurse’s, Information booklet.

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Introduction

Psychiatric Nursing is an integral part of the health care system and nurses have a great role. With the advent of consumer protection act 1986. The Nurses must be familiar with various laws such as
- Indian mental health act 1987
- NDPSA act of 1985.
- IPC section 269: Negligent act likely to spread infectious disease dangerous to life.
- Section 284: Negligent conduct with respect to poisonous substance.

Nurses should be aware of the legal responsibilities and obligations. Leaders in nursing profession must be aware that we are legally responsible for what we do. Psychiatric Nurse’s should have a proper knowledge regarding legal aspects and their responsibilities.

Problem statement

Effectiveness of information booklet on the knowledge of psychiatric nurses regarding legal responsibilities about patient care at selected mental hospital.

Objectives of the study

- To assess the level of knowledge of the psychiatric nurses regarding legal responsibilities about patient care.
- To determine the relationship between knowledge and selected demographic variables.
- To assess the effectiveness of information booklet on legal responsibilities about patient care[1,2].

Review of literature

Nursing is an autonomous profession and Nurses need to accountable for their own actions. Nurses must move towards more autonomous practice, professional responsibilities is increasing and should be made more accountable.

A study was conducted to examine differences in perceptions of wrong doing could affect the disclosure of unethical behavior. 372 registered nurses in the
study accepted that both intentional and unintentional wrongdoings could occur by a Nurse. A study was conducted to describe the knowledge, declared practices and opinions of healthcare workers (HCW) in psychiatry concerning information for patients about Hospital infection. Patients were randomly selected doctors, nurses and head nurses from four hospitals with psychiatric activity in Normandy. The HCW were asked to self-complete an anonymous questionnaire, including data describing the responding HCW and questions aiming at describing his/her knowledge, attitude in routine daily practice and opinion about information to patients about HI. One hundred and forty-one HCW were initially selected, of which 114 (80.9%) eventually agreed to complete the questionnaire.

Only eight HCW (7.0%) were considered to have a correct overall knowledge of legal obligations. Main errors concerned the obligation to inform the patient of the HI risk according to the medical procedures that are to be performed (43.9% of correct answers) and the obligation to inform the patient of the HI risk according to his/her medical condition (46.5%). The obligation to inform the patient of the occurrence of a HI was largely known (84.2%). HCW usually giving information about the risk of HI to patients without HI accounted for 5.3%. Main reasons advocated for not informing patients were a low level risk of HI in psychiatry (80.4%) and the lack of patients' demand (59.8%). In the case of HI occurrence, the percentage of HCW routinely informing patients was 13.2%. HCW systematically informing the patient's family about the occurrence of HI accounted for 9.6%. A large proportion of HCW supported delivering information to patients about HI (86.0%). HCW expected from information better approval of prevention programs by the patients (87.7%) but feared an increased anxiety in patients (75.4%) and a higher rate of care refusal (48.2%). Whereas a very large proportion of HCW in psychiatry support delivering information to patients about HI, our study shows HCW's lack of awareness of regulations and lack of declared practices. Among factors explaining this contrast, a lower perceived HI risk and severity level are to be mentioned. Training programs focusing on risk and mechanisms of HI could be offered to professionals in psychiatry.

The issue of specific communication difficulties with psychiatric patients should be addressed as well. In order to develop information on HI, specific methods suited to those patients should be developed[3-7].

Research methodology

A quasi experimental with one group pretest post test design was used for the study. Convenient sampling technique was used to select 60 samples from the selected Hospital Bangalore. A knowledge questionnaire was developed to assess the learning needs and to assess the gain in knowledge[7].

Table 1: frequency and percentage distribution of sample according to demographic characteristics

| S.No | Demographic variables               | Frequency | %    |
|------|-----------------------------------|-----------|------|
| 1    | Sex                               |           |      |
|      | Male                              | 14        | 23.33|
|      | Female                            | 46        | 76.67|
| 2    | Age in years                      |           |      |
|      | 20-25                             | 22        | 36.67|
|      | 26-30                             | 21        | 35   |
|      | 31-35                             | 10        | 16.67|
|      | 36-40                             | 3         | 5    |
|      | 41-45                             | 2         | 3.33 |
|      | 46-50                             | 2         | 3.33 |
| 3    | Professional qualification        |           |      |
|      | B.Sc. (N)                         | 23        | 38.33|
|      | GNM                               | 37        | 61.67|
| 4    | Experience in years               |           |      |
|      | 0-2                               | 43        | 71.67|
|      | 2-4                               | 8         | 13.33|
|      | 4-6                               | 7         | 11.67|
|      | Above 6                           | 2         | 3.33 |
| 5    | In-service education              |           |      |
|      | Yes                               | 13        | 21.67|
Table 2: Comparison of pre test and post test knowledge scores of staff nurses regarding legal responsibilities in patient care

| Knowledge scores | 10-20 | 21-30 | Mean | Sd |
|------------------|-------|-------|------|----|
| Pre-test         | 35    | 25    | 16.88| 5.63|
| Post-test        | 10    | 50    | 25.1 | 4.15|

Table 3: Area wise Comparison of pre test and post test knowledge scores of staff nurses regarding legal responsibilities in patient care

| Knowledge areas                        | Maximum possible score | Mean scores | T value |
|----------------------------------------|------------------------|-------------|---------|
|                                         | Pre test               | Post test   |         |
| Legal terms                            | 5                      | 1.98        | 4.33    | 13.45  |
| Admission discharge                    | 2                      | 0.82        | 1.68    | 14.56  |
| Safety responsibility                  | 7                      | 1.78        | 5.42    | 12.76  |
| Acts/negligence                        | 2                      | 0.83        | 1.65    | 10.78  |
| Consent/ MLC                           | 4                      | 1.8         | 3.22    | 8.67   |
| Clients rights                         | 4                      | 1.6         | 3.67    | 13.56  |
| Documentation/emergency                | 3                      | 6.87        | 2.5     | 12.23  |
| Safeguarding/interpersonal relationship| 3                      | 1.2         | 2.63    | 11.67  |

Table 4: Association between pre test knowledge with demographic variables

| Demographic variables | Chi square value | Df | p-value | Inference |
|-----------------------|------------------|----|---------|-----------|
| Sex                   | 0.102            | 1  | 0.749   | NS        |
| Age in years          | 1.071            | 1  | 0.301   | NS        |
| Professional qualification | 0              | 1  | 1       | NS        |
| Experience in years   | 0                | 1  | 1       | NS        |
| Inservice education   | 1.071            | 1  | 0.301   | NS        |
| Involvement in legal case | 1.20            | 1  | 0.273   | NS        |

Table value= 3.84

Data presented in the above table reveals that the calculated chi-square value is less than the table value, hence the null hypothesis is rejected.

Discussion

Majority of the participants were females 76.67%. Majority 78.33 had no prior in-service education. 96.67% of staff nurses were never involved in legal cases.

The result shows that the staff nurses had deficit knowledge regarding legal responsibilities in patient care. Total mean score was 16.88, which shows that the knowledge deficit is around 50%. There was a significant difference between pre test 16.88 and post test mean knowledge scores 25.1.

The assessment of association of knowledge of staff nurses on legal responsibilities with demographic
variables revealed that there is no significant association between knowledge with the selected demographic variables.

**Recommendations**
- A similar study can be replicated with a control group and on a larger sample to generalize the findings.
- Studies may be conducted to evaluate the effectiveness of information booklet versus other methods of teaching on legal responsibilities of nurses regarding patient care.
- A study can be conducted to see the improvement in practice of nurses in relation to the knowledge of legal responsibilities in patient care.
- A study to assess the attitude of patients in relation to the legal responsibilities of nurses in patient care.

**Conclusion**
Effectiveness of information booklet on legal responsibilities of staff nurses in patient care showed that there was highly significant increase. The paired t test pres test mean knowledge score was 16.88 were as in the post test it was increased to 25.1.

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