

Awareness of Patient Rights and Practice at Fayoum University Hospital

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Abstract

Background: Patient rights are essential pillars to provide good health care and to promote ethical medical practices. **Aim of work:** to understand the perspectives of Fayoum patients' on patients' rights in the government-run teaching hospitals of Fayoum University of Medical Sciences **Method:** A cross-sectional descriptive study was carried out at the inpatient wards of Fayoum University Hospital, Fayoum Governorate, Egypt. The study was conducted over four months from July to November 2019 **Results:** Only (21.8%) heard about patients' rights. The knowledge score was significantly higher among; the working patient, those who heard or read about the patients' rights and patients admitted in surgical sections (p-value =0000). **Conclusion:** Regarding the awareness and practice of the patients' rights among the patients in Fayoum university hospital there was a lake of knowledge. Only 42.34% of the patients were of good knowledge.

Keywords; Patient's Rights, Awareness, Egypt.

Introduction

Human beings have physical, mental, social and spiritual dimensions, from which they arise certain rights, whether they are in good or bad health. ⁽¹⁾ These rights cannot be achieved, defended and supported without assistance. ⁽²⁾ Contemporaneous ethical thinking on "human rights" places increasing emphasis on the concept of "ethics" within different professions, especially those that directly involve human beings, and forces the authorities in these professions to take fundamental human rights into consideration to achieve citizenship rights, consider patients as vulnerable human beings with special needs, and stress their rights more seriously than before ⁽³⁾

Patient rights are a pivotal human right since patients are one of the most helpless gatherings in the general public. ⁽⁴⁾ Patient rights are basic columns to give decent social insurance and to advance moral medicinal practices. ⁽⁵⁾

Finally, it should be stated that the principles of humanity and respect for human rights apply to the entire world. In Egypt, due to the moral lessons of Islam and the setting in cultural and human terms, special attention is paid to human rights, in general, and patients'

rights, in particular. This study aimed to understand the perspectives of Fayoum patients' on patients' rights in the government-run teaching hospitals of Fayoum University of Medical Sciences.

Methodology

1) Study design and setting:-

A cross-sectional descriptive study was carried out at the inpatient wards of Fayoum University Hospital, Fayoum Governorate, Egypt. Fayoum University Hospital is the only university hospital with multi-specialty departments in the governorate. The study was conducted over four months from July to November 2019.

2) Study population

A convenience sample of 418 patients admitted to the hospital was enrolled for this study. The inclusion criteria for the study were a fully conscious patient more than 18 years old or the relatives for the pediatric patients, able to give consent. Participants were aware of the aim of the study and they were informed that the participation is optional the critically ill patients were excluded.

3) Study tools

An interview structured questionnaire was designed to collect data for this study. The data collected by the authors. The questionnaire was developed based on the Egyptian Hospital Accreditation standards (6, 7), and questionnaires applied in previous studies (4, 8).

The questionnaire consisted of two parts: The first part for the patients' demographic characteristics, such as age, gender, residence education, marital status, working status, the admitted section and the source of the subject's information about their rights.

The second part consisted of scales designed to assess the patients' knowledge and practice about the patients' rights. The knowledge section included 18 questions to assess patient awareness about different aspects of the patients' rights such as: Health care and respect as human being, adequate information and, give written informed consent, hygienic environment and health education, Choice of care and participation and representation while, the practice section of patients' rights covered by 17 questions. The questionnaire was scored and the total score was computed for each subject. The knowledge score for each question was based on either 0 if the subject was not aware of this specific right and 1 if the subject was aware of the right. The lowest score would be 0 points while the highest score would be 18 points. A cut-off point was determined based on the median value of the total knowledge score (12) at or above the median value were classified as good knowledge, whereas those having a knowledge score less than the median value classified as having poor knowledge (9).

For the practice questions (done was scored 1 and not done was scored 0) with maximum total score 17, the practice score was considered poor if the score was less than or equal 8 (less than 50%), moderate if the score was 9 to 12 (50% to 70%) and good if the score was 13 to 17 (71% to 100%) (10).

4- Sample Size Calculation:

The sample size was determined for the study using Open Epi, Version 3, It was calculated based on the proportion of patients who know about the patients' rights 22.7 % (8). Awareness and practice of patient rights from a patient perspective: an insight from Upper Egypt, International Journal for Quality in Health Care, 2017, 1-7) and a design effect of 2 and confidence

limit 90% \pm 5%. Thus the least required sample size was 380 increased by 10% to avoid unresponsive rate 418. Frequencies and percentages for qualitative. All data were coded, entered, and analysed using Statistical Package for Social Sciences Program (SPSS, version 21, SPSS, Chicago, IL, U.S.A.). Mean and SD or median and interquartile range (IQR) were calculated for quantitative variables in the form of simple descriptive analysis. Independent test; Mann-Whitney, or Kruskal-Wallis test were used as a test of significant; a p-value of ≤ 0.05 was considered statistically significant. Categorical data were analyzed by computing numbers and percentages.

Results

The data was collected from 418 subjects; 65.1 % of them were males, and 34.1% were females. More than one-third of them (32.8) less than 30 years old, (44%) of them were illiterate. They were admitted at the internal medicine sections by (45%) and surgical sections (55%) Fayoum University Hospital. Most of them (75.6%) were working. Only (21.8%) heard about patient rights from those patients the mean source of the hearing was the mass media while only 11.2% of the patients read about patients' rights most of those through the hospital posters (95.7%) (Table 1). More than half (57.66%) of the patients have poor knowledge (figure 1)

The majority of our patients were aware of the aspects related to the items of health care and respect as a human being, the knowledge score was ranged from 364/418 (87.1 %) aware about the right to receive respectful care at all times to 378/418 (90 %) knowledgeable patients about the right to privacy during the medical examination. The patients were aware of the right to health care and respect regardless of the age, gender, color or religion by 362/418 (86.6%) (figure 2), while in relation to other items, 262/418 (62.7%) mentioned that they have the right to accept or refuse to participate in any medical research that may adversely affect them and 206/418 (49.3%) and the patient were aware, about the right to give a written and informed consent before any medical procedure. Only 200/418 (47.8%) of patients mentioned that they should participate in making decisions related to their medical care plan. The lowest knowledge score was reported regarding the awareness about the financial policy 112/418 (26.8%) of the patient knew about the policy of dealing with financial costs and health insurance and only 22/418 (5.3%) mentioned that they knew about the compensation methods on exposure

to injury, disease or complication during medical and nursing malpractice (**figure 3**).

Regarding the practice of the medical team towards the patients, only 2 patients (0.5%) received a copy of the patient rights charter. However, the majority (95.7%) and (96.7%) mentioned that they got health care at all times and emergency and first aid services whenever necessary. Regarding the curative services 24.6% could choose between different pharmaceutical products, 42.8% of them got a second opinion consultation from another specialist and 42.6% received a copy of the medical reports and the results of the tests. As regarding the consent form, 56.5% of the patient mentioned that they signed an informed consent form before any medical result and 44.5% received all necessary information before signing the consent form. Only 7.7 % of the patient informed how to complain about any concerns related to the quality of health care (**figure 4**).

Good practice represents 7.42% of the practice score, poor practice 24.16% and moderate practice 58.42% .

The knowledge score was significantly higher among the working patient, among those who heard or read about the patients' rights and among patients admitted in surgical sections (p-value =0000). The awareness was significantly higher among the younger patients (p-value=0.01) post-hoc test demonstrates difference was observed between the patient aged less than 30 to 49 compared by those aged 50-59 and those ≥ 60 years but not in-between the first three age groups. By post hoc tests between groups, this difference was significantly higher for the patient who heard from the physicians followed by the nurses. The knowledge score was significantly higher among the secondary and higher education compared by the other groups (p-value=0.000) There was no significant difference in the practice of the patients' rights towards the patients (**Table2**).

Table (1): Basal characteristics of study participants and their source of knowledge about patient rights, Fayoum, Egypt, 2019

Variables	Number (418)	Percent
Age of less than 30	137	32.8
30-39	107	25.6
40-49	55	13.2
50-59	48	11.5
≥ 60	71	17.0
Mean \pm SD	39.24 \pm 16.27	
Sex		
Male	146	65.1
Female	272	34.9
Residence		
Urban	243	58.1
rural	175	41.9
Marital state		
Married	303	72.5
unmarried	115	27.5
Education		
Illiterate	184	44
Read and write	35	8.4
Primary education	53	12.7
Secondary education	111	26.6
High education	35	8.4

Cont... Table (1): Basal characteristics of study participants and their source of knowledge about patient rights, Fayoum, Egypt, 2019

Working		
Working	316	75.6
Not	102	24.4
Inpatient admission		
Internal medicine	188	45
Surgery	230	55
Hearing about PR		
Yes	91	21.8
No	327	78.2
Source of information (91)		
Doctor	5	5.5
Nurse	12	13.2
Relatives	5	5.5
Educational seminar	8	8.8
Mass media	61	67
Reading about PR		
Yes	47	11.2
No	371	88.8
Source of reading (47)		
Hospital posters	45	95.7
Book	2	4.3

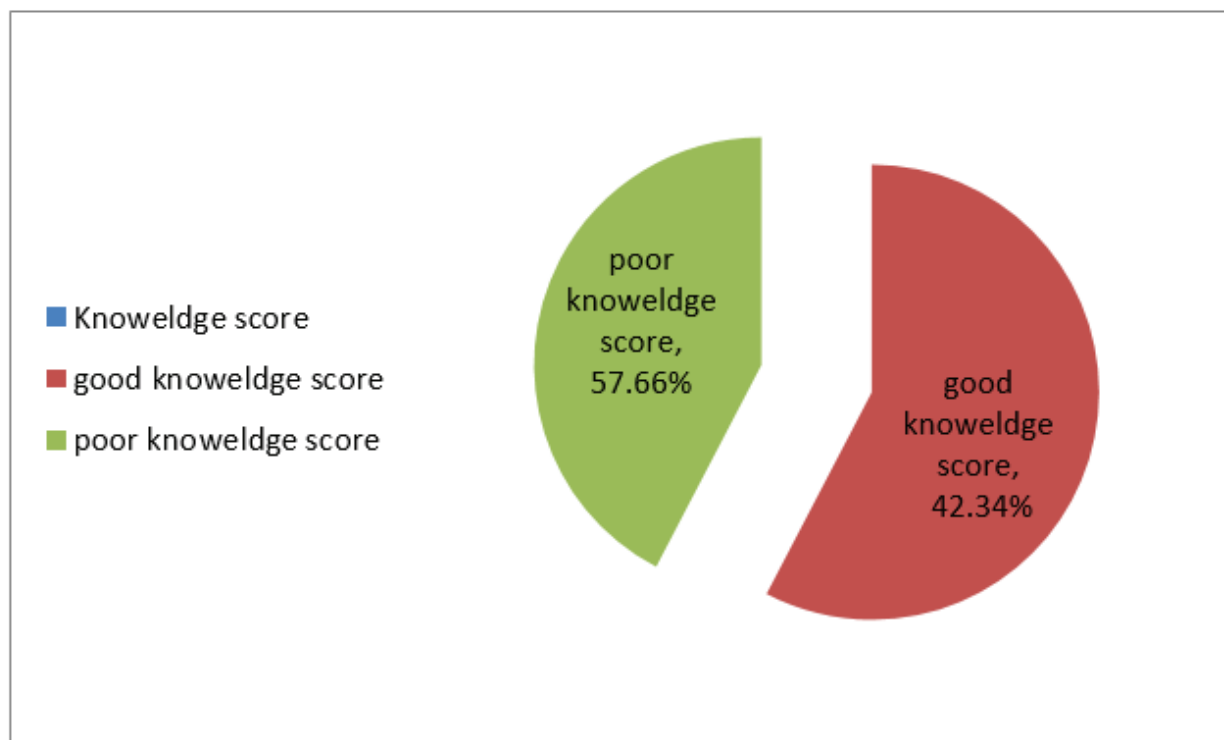


Figure (1): Distribution of knowledge score of the patient rights

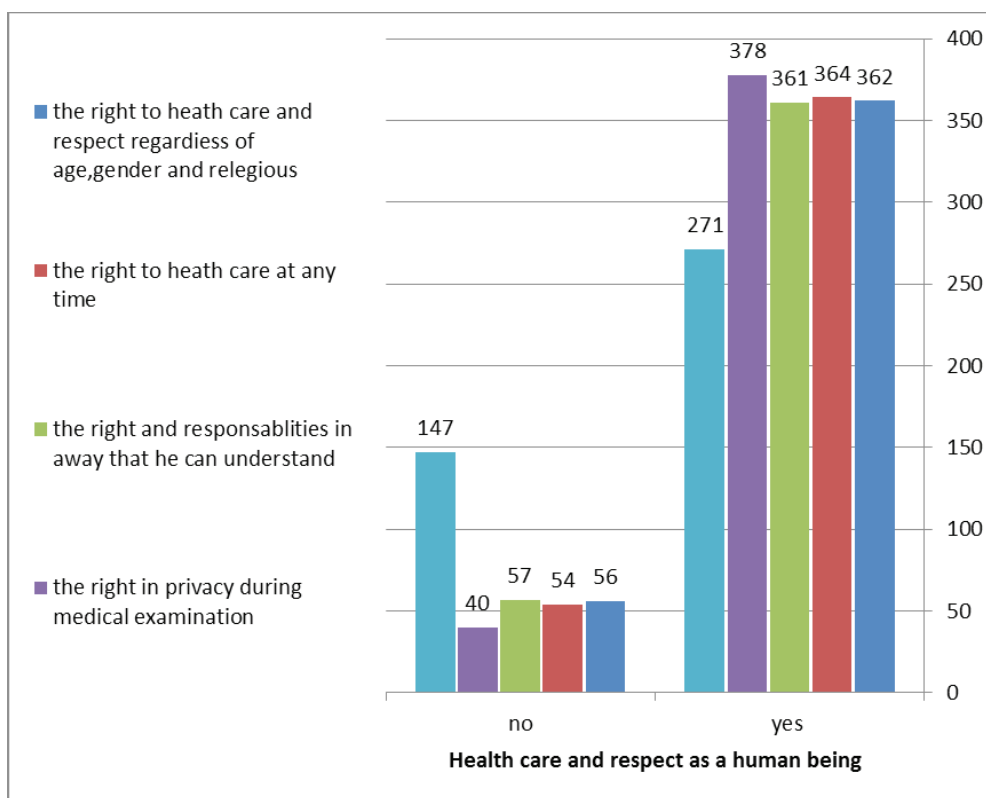


Figure (2): Knowledge of the participants about health care and respect as human being at Fayoum University Hospital (FUH).

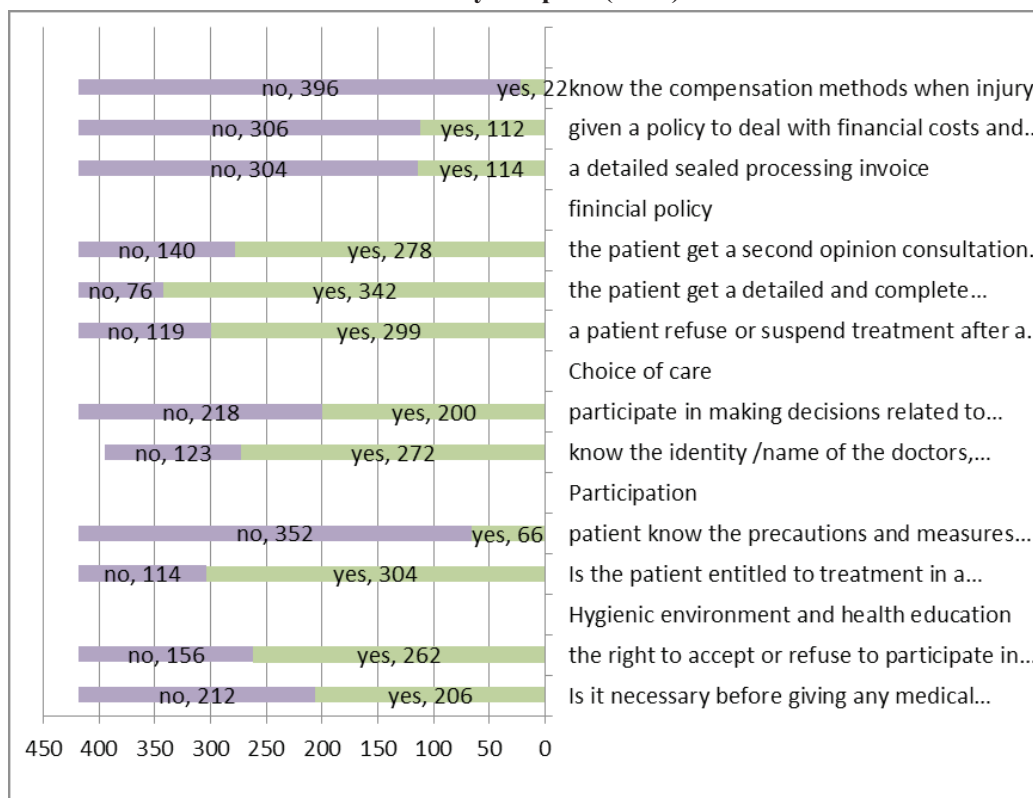


Figure (3) : Knowledge of the participants about their rights of adequate information and given written consent of hygienic environment, participation, choice of care and financial policy at Fayoum at Fayoum University Hospital (FUH).

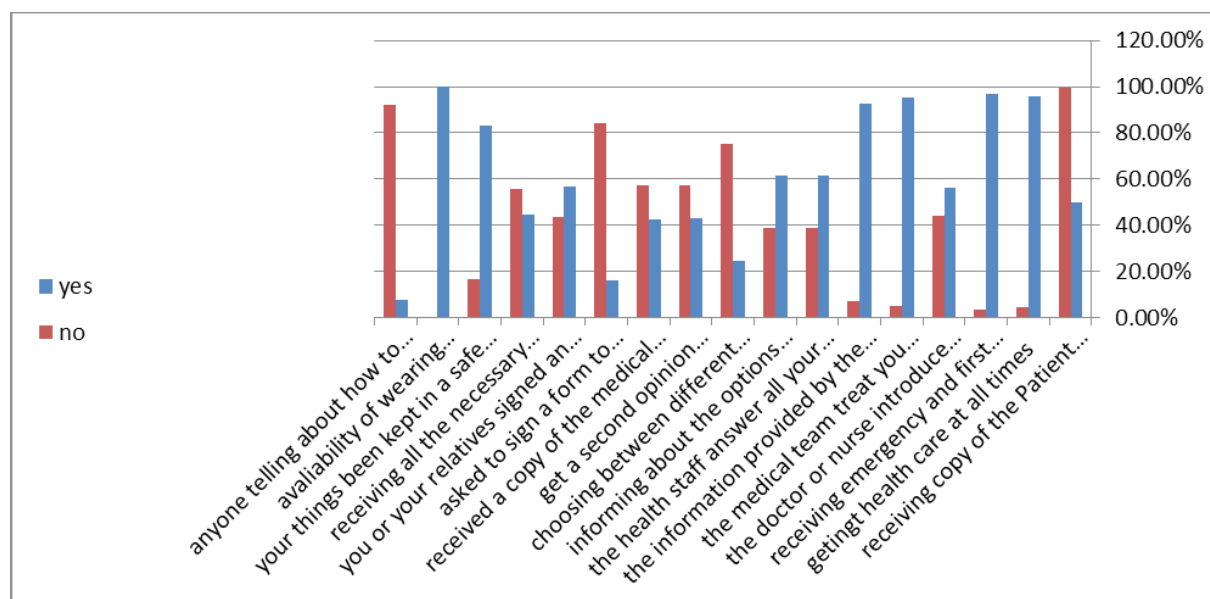


Figure (4): Practice of the medical team towards patients in Fayoum University Hospital (FUH).

Table (2): Knowledge and practice scores of the patients’ rights according to socio-demographic and source of knowledge.

Characteristics	knowledge score median (IQ)	P- value	Practice score Median (IQ)	P- value
Sex Male females	12 (14-8) 11 (14-8)	0.728	10(11-8) 10(11-9)	0.063
Marriage Yes No	12 (14-8) 11 (14-7)	0.616	10 (11-9) 10 (11-8)	0.056
Residence Urban rural	12 (14-8) 11(14-7)	0.295	10(11-8) 10(11-9)	0.558
Working Yes No	14(15.5-10) 11(13-7)	0.000*	10(11-9) 10(11-8)	0.303
Hearing Yes No	14(16-13) 10(13-7)	0.000*	10(11-8) 10 (11-9)	0.388

Cont... Table (2): Knowledge and practice scores of the patients' rights according to socio-demographic and source of knowledge.

Source of hearing				
-physician	18(18-16)		9 (11-7)	
-nurse	15 (16-13)		10.5(11-7.25)	
-relatives	8 (14-4)	0.005	11(11-9)	0.599
-educational seminar	14.5 (15-13)		9(10-9)	
-mass media	14 (16-13)		10(11-9)	
Reading				
Yes	14(16-13)		10(11-9)	
No	11 (13-7)	0.000*	10(11-9)	0.931
Department				
Surgical sections	12 (14-9.75)		10(11-8)	
Internal medicine	10 (13-5)	0.000*	10(11-9)	0.851
Education				
Illiterate and read and write	9(12-5)		10(11-8)	
Primary education	12(13-8)	0.000	10(11-9)	0.247
Moderate and high education	15(16-13)		10(11-9)	
Age of less than 30	12(15-8)		10(11-8)	
30-39	12 (15-9)		10(11-9)	
40-49	12(14-8)		10(11-9)	
50-59	9 (13-7)	0.001	10(11.75-8)	0.299
≥60	11 (13-6)		10(12-9)	

$P \leq 0.05$

Discussion

Health care organizations have established characters for the patients' rights to achieve patient satisfaction and ethical health care. The results of this research indicate that, despite the introduction of specific legislation, hospital patients are not yet aware of their legal rights. As the majority of the patients (78.1 5%) did not hear about the character of patient rights this was similar to a study conducted in Minia University Hospital, Egypt ⁽⁸⁾ and Beni-Suef University Hospital, Egypt ⁽¹¹⁾, but was higher than that reported by Ghanem et al. ⁽⁸⁾, who found that 27% of patients in Alexandria Main University Hospital and 53% of patients in Matrouh General Hospital were not knowledgeable about the charter of patient rights. The main source of information (hearing) in our study was the mass media (67%) followed by the nurse (13.2%) also; reading posters and brochures in the hospitals this was approximately similar to Zeina et al. ⁽¹⁰⁾

In the current study, Most of the patient more than 85% were aware of the right to health care, respect and at any time, the right to privacy during the medical examination, the right of the patient to get a detailed and complete explanation of any unexpected thing during the care and treatments, these results were in agreement with Mohammed et al ⁽⁹⁾, to a study conducted in Saudia Arabia ⁽¹¹⁾ on the other hand the lowest score was about the awareness of financial policy ranged from 5.3% to 27.3 % while others reported the lowest score of the awareness about the rights of the patient in the participation in the treatment plan and choice of care. ^(12,13,14)

The knowledge score was significantly higher among the working patients, educated patient (secondary and high education), among who heard or read about the patient rights p value=0.000, although the mass media was the mean source of knowledge however the score

was significantly higher among the patients provided the information by the physician followed by the nurse this pointed the important role of the medical team in giving the confidential information and the importance of direct communication between the medical team and with the patients in improving the awareness of the patients also, the knowledge score was significantly higher among the age group from 30 to 39 years old (p value=0.01) and among the patient admitted to the surgical section (p value=0.000) this may explain the difference in the treatment process and fair of surgical procedures. Other studies found that there was an inverse relation between awareness score and age ^(9,15), there was a positive association between the knowledge score and higher levels of education. ^(16, 17)

Conclusion

Regarding the awareness and practice of the patients' rights among the patients in Fayoum university hospital, there was a lack of knowledge. Only 42.34% of the patients were of good knowledge and 21.8% heard about patient rights character.

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