

Respect to the Bill of Patients' Rights in the Educational Hospitals in Ahvaz, Iran

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Abstract: The patient's right is one of the fundamental issues in health care. The present study aimed to evaluate the compliance rate with the bill of patient's right in the educational hospitals in Ahvaz Jundishapur University of Medical Sciences, Iran. This was a cross-sectional study on 500 inpatients and outpatients from three educational hospitals recruited. Data were gathered via a questionnaire containing general and specific information about knowledge and attitude of patients about bill of patients' right. The questions about bill of patients' right were prepared according to the bill of patients' right issued by Iranian Ministry of Health. The descriptive, chi square and Kruskal-Wallis tests were used for data analysis. Most of participants (93.5%) did not get any information regarding patient's right. There was a significant relationship between age and right of choosing hospital and physician ($p=0.01$). Most of patients believed that their rights about knowing the name and specialty of physician have been ignored by health providers and there was a significant relationship between this right and age ($p=0.004$). Most of patients claimed that they have been not provided information about hospital costs and there was a significant relationship between this right and age ($p<0.001$) and education ($p=0.01$). In conclusion: This study showed that patient's information and attitude about bill of patients' right are not in the satisfactory level. Patients should be informed about their rights in time of admission to the hospitals.

Key words: Bill of Patient's Right • Hospital • Knowledge • Attitude

INTRODUCTION

Hospitals are integral part of medical and social organizations which should provide the health care for whole society and also are centers for medical students' education [1]. In order to provide quality in health care services, respecting to standards of medical ethics and patient rights in health care is inevitable. The patient has essential needs like any other human. Because he cannot fully provide his needs, he needs help from family and other medical staff. Awareness about the needs of patients can be a basis for better understanding of patient's needs and providing a useful framework for better medical care [2]. Thus the medical staff must have sufficient knowledge about patients' needs and how to satisfy them. They also should identify the situations that will satisfy these needs and in timely manner to meet the needs of patients should consider the patient' rights.

Patients satisfaction with the services offered, is one of the important goals of medical care which can have significant impact on health status of patients [3]. Emphasizing to fundamental rights of patients especially preserving their dignity in the medical care is very important. When the patient is exposed to irregularities and shortcoming of health and social system, he/she will be exposed to harm [4]. Respect to the patient' rights and determination of legal framework for it, has a long history in medical health care in other countries. However it seems that; in the health care services to patients in some countries, maintaining the territorial rights of patients has not been well addressed [5]. Since 1960, there were fundamental changes about patient' rights in the inpatients in European countries and America. Thereafter more nurses and doctors have criticized by patients about the ways of care and treatment. In order to meet the expectations of patients, the legal principles regarding

informed consent of patient for therapeutic procedures have to be considered. Prohibition against disclosure of confidential information relating to patient respect and dignity without discrimination in race, sex and family situation in medical care and treatment also should be taken into consideration. There is also a set of rules against fraud in account and especial dependency among patients [6]. Some of the general principles of patient's right are equitable relationship with the patient and family's privacy and considering the confidentially aspects of patient information. Also providing medical care and treatment without discrimination regarding sex, race, language, nationality, type of insurance and generally poor financial situation never should be considered as a matter to prevent patients' access to health care with respect. Lack of patient rights has a lot of stress for patients and families and on the other hand is causing irreparable damage to the social reputation of health system.

In the fact the patient' right is defense of human rights in order to preserve the dignity during illness and in particular to ensure that patient receives high quality care and treatment without any sex, age and financial strengths discrimination [7]. Constitution of the Islamic Republic of Iran (Article 29) emphasizes on access of all residents in the society to health services without any discrimination, considers and guarantees the rights of all sections of people in the society. Also in regarding to admission of patients and avoid exposing their secrets and to help injured patients and elimination of hazards, there is a law which was approved in 1985 in Iran. Ministry of Health (Education Assistant) in 2002 approved the bill of patients' rights and respect to clients [8]. The aim of bill of patient' rights is that; considering of fundamental rights of patients who are admitted in the health care centers according to the rules and regulation. This could conclude to the more satisfaction for patients in hospitals and can prevent wastage [9-11]. Also the staff should have appropriate knowledge and attitude about bill of patients' rights. In the best of knowledge's of researchers there is a lack of information about human rights in Ahvaz, Iran. This study aimed to evaluate the knowledge and attitude of patients in educational hospitals about bill of patient' rights in Ahvaz, Iran, 2012.

MATERIALS AND METHODS

This was a cross-sectional study on 500 out and inpatients in three educational hospitals; (Razi, n= 120), (Golestan, n=160) and (Imam, n= 220) in Ahvaz recruited. This study started at September and finished at December

2012. A questionnaire consisting of 16 socio-demographic questions and 28 questions about bill of patients' rights was used for data collection. This questionnaire was designed according to the bill of patient's right issued by Ministry of Health, Iran. The design of this study was approved by Ethics Committee of Ahvaz Jundishapur University of Medical Sciences. The informed consent from participants was obtained prior to the study. Inclusion criterion in this study was including; having a medical record as an inpatient or outpatient in the three educational hospitals. All data were collected using the interview. For ill patients, we submitted the questionnaire in the hospital and they mailed them back to the researchers. There were four questions for assessing knowledge and 28 questions for attitudes of patients about bill of patients' rights. We considered zero score for negative answers, one for partially positive and two for positive reply to questions about knowledge. According the sum of numbers, we classified the knowledge of participants about bill of patient's right to weak (1-4), moderate (4.1- 6.4) and good (>6.5).

Data entry and analysis were done by SPSS ver 18. The descriptive, chi-square and Kruskal-Wallis were used for statistical purposes. Chi-square and Kruskal- Wallis test were used for assessing correlation between education, sex, marriage status and the respect to the bill of patient' right.

RESULTS

Most participants in this study were female, married, had high school education and 79% of subjects were inpatients (Table 1). Most patients (93.5%) did not get any education about patients' rights in the hospital.

Table 1: Socio-demographic characteristics of participants

	n= 500
Characteristics	Mean ± SD or N (%)
Age	38.5±18.7
Sex	
Female	298 (59.6)
Male	202 (40.4)
Marital status	
Single	92 (18.4)
Married	408(81.6)
Education	
Illiterate	166 (33.2)
High school	239 (47.8)
Diploma	79(15.8)
University education	16(3.2)

Table 2: Correlation of knowledge of participants about respect to the patient's right and some socio-demographic variables

Variable	Knowledge n= 500 N(%)			Test value
	Good knowledge	Moderate Knowledge	Poor knowledge	
Age (y) Mean ±SD	33	43.5±24.4	38.4±18.5	$\chi^2= 0.59$
Sex				
Male	0	9(1.8)	193(38.6)	
$\chi^2= 1.69$				
Female	1(0.2)	6(1.2)	291(58.2)	
Education				
Illiterate	0	5(1)	161(32.2)	
$\chi^2= 1.25$				
High school	0	102(20.4)	137(27.4)	
Diploma	1(0.2)	6(1.2)	72(14.4)	
University education	0	1(0.2)	15(3)	
Marital status				
Married	1 (0.2)	11(2.2)	396(79.2)	$\chi^2= 0.47$
Single	0	4(0.8)	88(17.6)	

Table 3: The respect to the patient's rights in the hospital from the patients' view of point

Respect to the patient's right	Good respect	No respect	Partial respect
	N (%)		
1.Information provided about patient's right in the time of admission to the hospital	30(6)	468(93.6)	2(0.4)
2. Providing proper care without discrimination	355(71)	50(10)	95(19)
3.The co-operation between health providers' team	354(70.8)	52(10.4)	94(18.8)
4.The right of choosing physician and hospital by patient	259(51.8)	236(47.2)	5(1)
5.The right of consult with other doctors	188(37.6)	310(62)	1(0.2)
6.Knowing the name and specialty of physician	232(46.4)	265(53)	2(0.4)
7.Knowing the name and specialty of health staff	64(12.8)	427(85.4)	9(1.8)
8.Taking proper information about disease and treatment process	371(74.2)	83(16.6)	46(9.2)
9. Taking proper information about possible complications	397(79.4)	59(11.8)	44(8.8)
10. Obtaining informed consent prior to any medical procedure	415(83)	37(7.4)	48(9.6)
11.Rights to refuse treatment after knowing of the consequences of her decision	381(76.2)	95(19)	24(4.8)
12.Getting essential information in case of possible complications	397(79.4)	59(11.8)	44(8.8)
13.Treating patient's information confidentiality	490(98)	2(0.4)	8(1.6)
14.Compliance with patient privacy	386(77.2)	90(18)	24(4.8)
15.Respect for the religious and cultural values of the patients	402(80.4)	69(13.8)	29(5.8)
16.Getting informed consent before any educational or research work	468(93.6)	26(5.2)	6(1.2)
17.Getting consent from patient before her/his transfer	472(94.4)	28(5.6)	0
18.The right to access their medical records and necessary administrative	454(90.8)	44(8.8)	2(0.4)
19.The right to sue the hospital authorities upon their ignorance	253(50.6)	246(49.2)	1(0.2)
20.Making decisions about treatment and discharge or refer to another hospital by patient	317(63.4)	182(36.4)	1(0.2)
21.The right of access to the medical doctor and the other specialists after discharge from hospital	445(89)	53(10.6)	2(0.4)
22The right of meeting family and relatives	498(99.6)	2(0.4)	0
23.Awareness of the rules regarding their care	425(85)	69(13.8)	6(1.2)
24.Get information about the rates and coverage of insurance	291(58.2)	194(38.8)	15(3)
25.Get information about the cost of treatment before treatment	99(19.8)	387(77.4)	14(2.8)
26.Get receipt of expenditure account	499(99.8)	1(0.2)	0
27.Get health care according to the new scientific methods	443(88.6)	56(11.2)	1(0.2)
28.Providing information in patient's own language	484(96.8)	10(2)	6(1.2)

Most of them did not experience legal problems in the hospital and many did not know how to follow their problem, in the case of malpractice in the hospital. Table 2 demonstrates the knowledge of patients about bill

of patient' right and its relationship with some socio-demographic factors. More than 95% of patients did not have sufficient knowledge about bill of patients' right. There was no any significant difference between respect

to the patient' right and level of education, marriage status, age and sex. Table 3 is demonstrating the attitude of patients about bill of patient' right. Most patients believed that their rights have been ignored by health providers in many cases e.g. providing information about patient's right in time of admission to the hospital, the right to consult with other physicians, knowing the name and the specialty of health providers and information about costs of hospital care. There was a significant relationship between age and right of choosing hospital and physician ($p=0.01$) when the younger patients believed that this right has been ignored by health providers in hospitals. Most of patients believed that their rights about knowing the name and specialty of physician has been ignored by health providers and there was a significant relationship between this right and age ($p=0.004$). Most of patients claimed that they have been not provided information about hospital costs and there was a significant relationship between this right and age ($p<0.001$) and education ($p=0.01$).

DISCUSSION

Respect to the patient's right and considering a legal framework for that has a long history in all countries. The present study showed that the patient's bill of right has been not fulfilled in time of providing of health care and treatment for patients. On the other hand patients also did not have any information about their rights during admission and treatment and it could cause irreparable damage to their personality and psychological status [2, 10]. The patient's right and equal access to health services without any discrimination has explicitly stated in the Constitution of the Islamic Republic of Iran. The aim of bill of patient's right is that the fundamental rights of patients should be respected and explained by health providers in the health care and treatment centers [3, 4]. Our study showed that; patients did not have proper knowledge about bill of patient' rights. Although most patients did not encounter the legal problems, but in case of malpractice they did not know how to follow their problem. It seems that all these can lead to patient dissatisfaction with the quality of health care. Our results are in line with the Mosadegh Rad study [12] on which he realized that patients do not have enough knowledge about their rights and it can cause dissatisfaction among patients.

Our results showed that the patients believed that their rights have been ignored by health providers in many cases e.g. providing information about patient's

right in time of admission to the hospital, the right to consult with other physicians, knowing the name and the specialty of health care providers and information about costs of hospital care. There was a significant relationship between these ignorance and age and education of patients. Razavi and Bahshea [13] found that most medical doctors believed that patients should have enough knowledge about their rights and hospitals have responsibility to provide essential information to them. A study by Rangraz and Rabiei [14] showed that patients believed that the health care providers do not respect their rights. Also the results of Aliakbari and Taheri [15] showed that respect to the patient's right is not in the acceptable level. A study in Kenya showed that; nurses' impoliteness may not appear like rudeness, but it may encode a violation against dignity, human right and free expression of ideas [16]. A study in Saudi Arabia on 250 hospitalized patients also indicated that; 25.2% of patients did not know that they have rights and half of them were aware about six rights [17].

A cross-sectional study in Isfahan showed that; 40% of patients had very weak knowledge, 41.9% had weak knowledge and only 18.1% of patients' knowledge was in average level about their rights. There was a significant correlation between patient' awareness and education, living place and job ($p<0.05$) [12]. In our study most of patients with the different level of education from illiterate to diploma were not aware about the bill of patients' rights in the hospitals. However only small percentages of patients (3.2%) had university education.

Patient' rights in all wards in hospitals in Ahvaz has been a board, however, the contents of these boards are not expressed to patients in time of admission. A study in Tehran by Najafi Poor *et al.* [18] showed that; the bill of patient' rights have been observed by 14% of patients and only 6% of patients have read it. Our results are in line with the Najafi Poor *et al's* study. A study in the USA showed that; for reading and understanding patient's bill of right the advanced college reading level is required and most people may are not qualified to fulfill that [19].

Our study had a good coverage for all in and outpatients in all educational hospitals in Ahvaz, however we could not cover private hospitals and this is one of the limitations of this study. Although we intend to consider private hospitals in another study.

This study showed that patients information and attitude about bill of patient' right are not in the satisfactory level. Patients should be informed about their rights in time of admission to the hospitals.

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