Nurses' Perception Regarding Legal Aspects Liabilities at

Port Said General Hospitals

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ABSTRACT

Background: The nursing profession faces many challenges nowadays so, nurses in daily practice are responsible for adhering to the professional ethical practice standard. Aim: The present study aimed to determine nurses 'perception regarding legal aspects of liabilities at port said hospitals. Subjects and method Design: A descriptive research design was used. Setting: This was conducted at the inpatients' departments of as- salam Hospital, el-zohour hospital and al hayah portfouad hospital affiliated with universal health insurance in port said governorate. Subjects: A sample with a total number (of 173) nurses was selected by using a simple random sampling technique. Tools: Personal and job characteristics of the participants and perceptions about legal liability were used. Results: More than half of nurses (57.8%) have a low perception of informed consent, while 10.4% of them have a low perception of the invasion of privacy. As well, 50.3% of them have a moderate perception regarding dealing with suit-prone patients, almost twothirds of them (63.0%) have a high perception of malpractice, but 10.4% of them have a high perception of defamation of character. Conclusion: Less than half of studied staff nurses had moderate perception related to total legal aspects liabilities, while one-quarter of them had high perception and slightly more than one-quarter had low perception. Recommendations: Training on nurses' law and its relevant matters to enhance safe nursing practice. And more research should be done to further investigate the factors influencing nurses' perception regarding legal aspects of liabilities.

Keywords: Legal aspects, Liabilities, Nurses, Perception, Port said hospitals.

INTRODUCTION

Nursing is a dynamic profession and the environment where nurses work is fast changing and continuously diverse for clients and consumers leading to the existence of legal risk in the provision of nursing care. So, the nursing profession demands specialized knowledge, skills, and the ability to make decisions independently which varies by medical situation, the condition of the patient, diseases, therapeutic and medical approach in health care, or patient level of progression. With this possibility in mind, the utilization of prepared and competent nurses helps reduce the legal risk (Verghese &Jomon, 2016).

Day by day, the wide scope of the nursing profession has brought increased nursing practice responsibility and legal accountability with it, increased exposure to liability that nursing is an interactive profession. Even though, The primary aim of nursing is to help and provide nursing care plans to those in unstable health status, the medical functions, specific tasks of the health sector, and nursing procedures have advanced and changed markedly. New complex changes in nursing responsibilities and practices led to highly potentially legal liabilities for nurses (Szalados, 2021).

Nurses are to act as autonomous bodies, so liability to the nursing profession is imperative. A vital part of nursing for patient safety is assessing and communicating effectively. Legal liability was defined as the legal system that helps the nurses in their clinical framework and to understand and being aware of the legal aspects is basic for the nurse to practice and provide patient care securely (Jegan, 2021). Also, legal liability is defined as the legal responsibility for one's actions or failure to act appropriately. Simply, liability means falling under the law and legal responsibility. For example, when nurses fail to carry out orders received from the doctors, they are liable (Mattozinho & Freitas, 2021).

Over the past several decades medical care has seen dramatic advances in knowledge about disease processes and technology for the diagnosis and treatment of illnesses. The tremendous number of medical malpractice actions currently being instituted results directly from these highly complex and advanced methods of delivering health care (Vincent, 2011). There are several dimensions of legal aspects liabilities including negligence, malpractice, assault, battery, false imprisonment, invasion of

privacy, disclosure of information, defamation of character, misrepresentation, and fraud, infliction of mental/emotional distress, the doctrine of respondeat superior, and staffing issues(Pozgar, 2019).

A legal misfortune can happen every second nurse performs patient care. A large number of nurses have insufficient training in the advanced healthcare sector legal aspects of issues such as suit-prone patients, negligence, autonomy, and malpractice. It was noticed that when a nursing study program provides effective and sufficient subjects and helps them to be guided by ethics and legal aspects and discuss the ways that help nurses to aware of law related to their, advanced clinical education and training on modern technology can effective to the develop skills. attitude, and knowledge of nurses. Nurses have a strong, independent, and obvious legal, ethical and professional role to help patients to heal with a high-quality, effective, complete level of care (Kjervik & Brous, 2010).

Healthcare professionals must be encouraged to update their knowledge and maintain clinical competence. The rapid changes currently taking place within healthcare systems have increased the pressure from direct care providers, professional bodies, and the general public for nurses to participate in continuing education programs. Despite a growing body of empirical research on this topic, the effectiveness and impact of continuing education remain underexplored (Dowie, 2017).

Significance of the study:

Nurses need to realize, understand and practice legal discipline during work time. The new healthcare difficulties and changes of lack of supplies, resources, critically ill patients, more complicated medical changes, modern technology, new supplies, modern programs, and new diseases mean the nurse should know, understand, and practice the legal discipline essential to work securely(Cown & Moorhead, 2014). Legal aspects liabilities include the legal situation or work environment, regulations of nursing practice, levels of standard of care, negligence prevention, malpractice, legal suits, professional accountability and liability, issues related to witness nurses, and when opposing an assignment. Nurses should be able to understand and follow the law that guides and organize their work to know their rights and responsibilities and obviate risks and lawsuits. The awareness of legal and ethical rights for the nurse is linked to the demand of nursing staff in their clinical practice (Singh & Mathuray, 2018).

AIM OF THIS STUDY

Determine nurses 'perception regarding legal aspects liabilities at port said hospitals affiliated with universal health insurance.

Research Questions

1- What are the nurses' perceptions regarding legal aspects liabilities at port said hospitals affiliated with universal health insurance?

2- Is the personal and job characteristics of nurses affecting their perception regarding legal aspects liabilities at port said hospitals affiliated with universal health insurance?

SUBJECT AND METHOD

Research Design:

The design which was used in this study is a descriptive research design.

Study setting:

The current present study was conducted on inpatients departments at three hospitals affiliated with universal health insurance in port said governorate namely: Assalam hospital, El-zohour hospital, and Al- hayah portfouad hospital.

Study Subjects:

The total number of the study sample (was 173). Studied nurses who participated in the study were selected by a simple random sample recruited from the three public hospitals mentioned before.

Sampling size:

The sample size was estimated by the following equation:

$$S = \frac{X^2 N P(1-P)}{d^2 (N-1) + X^2 p (1-P)}$$
 (krejcie & Morgan, 1970)

Where:

S: sample size

N: Population size (315)

P: the probability (30%-60%) or =50%=0.50

d :error proportion-0.05

X: confidence level at 95% (standard value of 1.96) \rightarrow x²=3.841

 $S = \frac{3.841x315x0.50(1-0.50)}{(0.05)^2x(315-1)+3.841x.50(1-50)} = 173.31 \approx 148 \text{ nurse}$

The sample size will include (s=173) nurses distributed as follows:

- As- salam hospital (s₁):

$$S_1 = \frac{Number of nurses at As - salam hospital}{Population size} x sample size = \frac{170}{315} x 173 = 93.36 \approx 93 nurse$$

El-zohour hospital (s2):

S2= $\frac{Number of nurses at El-zohour hospital}{Population size}$ x sample size = $\frac{69}{315}$ x173=37.89 \approx 38 nurse

- Al hayah portfouad hospital:(s3):

$$S3 = \frac{Number of nurses atAl hayah portfouad hospital}{Population size} x sample size = \frac{76}{315} x 173 = 41.73 \approx 42 nurse$$

Inclusion criteria:

The studied nurses were chosen with no age limit and who had at least one year of experience, all available educational levels, and their approval to share and participate in the study.

Data collection tool:

The tool that was used in the present study consisted of two sections as follows;

Section (1): Personal and job characteristics of the participants:

Includes data about nurses' age, sex, experience years after graduation till now, experience in the current unit in years, level of education or qualifications, nurses' recruitment setting in the hospital, unit type, and attendance of any previous workshops or seminars regarding nursing legal liability.

Section (2): Nurses' perception regarding legal liability questionnaire:

The tool was adopted from (**Elsayed, 2017**). This tool aimed to assess nurses ' perception regarding legal liabilities at port said universal health insurance hospitals. It consists of (63) questions used to assess (13) dimensions of legal liability as follows: negligence (4) questions, malpractice (8) questions, assault (6) questions, battery (5) questions, false imprisonment (3) questions, character defamation (5) questions, fraud (6)

questions, privacy invasion (3) questions, informed consent (4) questions, physician order and doctor order for carrying out medical procedures (4) questions, issues of staffing (5) questions, dealing with suit prone patients (5) questions, and nursing students employment (4) questions and non-nursing unlicensed personnel (1) questions.

Scoring system:

Questions are distributed in the shape of three forms: the first form is case study questions, the second form is multiple choice questions, and the third form is true or false questions. The first form question (n=17), the second form questions (n=22), and the third form questions (n=24). For cases study questions; every case study has consisted of a scenario that occurred during the clinical practice of nursing and includes actions of nursing and then straight afterward one question in the form of multiple choice that asks the nurses about their knowledge related to nursing liability in the case study. In some case studies questions, one question or more is used to assess the perception of nurses about the type of liability included in the case study. The (I don't know option) was added for all questions that were intentionally put because some participants in the study can choose I don't know option when haven't the knowledge to answer the questions. The correct answer was assigned one while the incorrect answer was assigned zero. All answers and scores sums represent the total perception of nurses of nursing legal aspects liability. The total score of perception toward legal aspects liability was rated as the following percentage: less than 50% of total perception indicated a low perception, 50% to less than 75% was considered as moderate perception, and equal or more than 75% of the was considered as high perception (Elsayed, 2017).

Pilot study:

A pilot study was carried out on (17 nurses) who represent 10% of the studied sample who are randomly selected before starting the collection of data, to assure the clarity and tool applicability, and to estimate the time needed to fill the questionnaire modifications were done. The participants who took part in the pilot study were excluded from the study results and the estimated time needed to complete filling the questionnaire consumed 30 - 35 minutes.

Tool Reliability:

The tool reliability was assessed using Cronbach alpha (coefficient alpha) for internal consistency which yielded 0. 87. The final form of the tool includes 63 reliable questions.

Tool Validity:

The data collection tool was revised by the researcher and got the supervisor's approval. Also, the tool was checked for face and content validity by five academic professionals in the fields of; nursing administration, medical surgical nursing, and psychiatric& mental health nursing.

Fieldwork:

The investigator obtained official permission from the directors and matrons of the three hospitals and explained the study's purpose and approach of filling and completing the questionnaires clearly and honestly explained for all participants after taking their permission to participate. The investigator met them in different shifts according to their schedule and distributed the study tools to them. Consequently, some nurses filled the tools at the time of distribution and others returned the tools after a while. Overall, the process of data collection started and finished in almost three months (starting from the beginning of January 2020).

Administrative design:

A formal letter from the faculty of the nursing dean and vice dean for post-graduate studies and research was sent to the directors of the three hospitals. The director of the mentioned hospitals was contacted and informed to obtain permission and informed consent to include the nurses in the present research.

Ethical Considerations:

Verbal approval was obtained from all participants prior data collection stage. Anonymity was maintained and assured; no burden or risk was imposed on participants and no pressure or coercion was applied. Confidentiality was declared to all nurses participating in the study. The researcher assured that information will be used for scientific research purposes only.

Statistical analysis:

The collected data were categorized and analyzed by computer using the statistical package for social science (SPSS), version 22.0. Data were coded and then the output drafts were checked against it for spelling and typing and mistakes. In the end, analysis

and interpretation of data were conducted using the following statistical measures; the normality of the data was tested with a one-sample Kolmogorov–Smirnov test. Qualitative data were labeled using numbers and percentages. Continuous variables are shown as the mean and standard deviation. Kruskal-Wallis test(H) and Mann-Whitney test (Z) were used for nonparametric data.

The independent predictors of legal aspects liabilities scores can be identified, best fitting multiple linear regression analysis was used and an analysis of variance for the full regression models was done. The significant level of the statistical analysis (P) was considered at ≤ 0.05 and the highly significant was considered at ≤ 0.001 .

RESULT

Table (1) : This study was conducted on 173 nurses. Regarding their personal and job characteristics in the table (1), the mean value (\pm SD) of age is 36.23 \pm 8.89 years old. Almost two-thirds of them (63%) are females. More than half of them (53.2%) are married; more than half of them (53.8%) work in As-salam hospital, also more than half of them (52.6%) have a bachelor's degree. Twenty-eight point three percent of them work in the Surgical department, while (11.6%) of them work in the operating room. The mean value (\pm SD) of their nursing years of experience is 12.7 \pm 9.8 years; in addition, the mean value (\pm SD) of their years of experience in the department is 10.1 \pm 6.3 years.

Table (2) : illustrates the legal liabilities dimensions as perceived by studied nurses. 61.3% of nurses have a low perception of defamation of character followed by, (57.8%) of them having a low perception of informed consent, while 10.4% of them have a low perception of the invasion of privacy. As well, 50.3% of them have moderate perception regarding dealing with suit-prone patients, whilst 13.9% of them have moderate perception regarding malpractice. Almost two-thirds of them (63.0%) have a high perception of malpractice and battery, but 10.4% of them have a high perception of character.

Figure (1): shows that 46.8% of nurses had moderate perception related to total legal aspects liabilities, followed by 27.7% who had low perception. While 25.5% of them had high perception.

Table (3): reveals that a statistically significant difference is found between total nurses' perception of legal aspects liabilities according to hospitals (H=8.182, p=0.017*). And the staff nurses in As-salam hospital had the highest perception than other the two hospitals.

Table (4): This table shows a relationship that was statistically significant exists between the perception of legal aspects liabilities and the studied nurse's educational level (H=14.016, p= 0.008^*). No statistically significant relations are found between perception and their age in years (H=3.811, p=0.702) and so their marital status (H=4.784, p=0.572).

Table (5) : represents that, no statistically significant relations are found between perception toward legal aspects liabilities and the studied staff nurses in terms of Department, Gender, Nursing years of experience, and years of experience in their department with (H=3.391, p=0.971), (U = 0.449, p=0.779), (H=3.361, p=0.763) and (H=0.764, p=0.993) respectively.

Table (6) : stated that the significant model detected through F test value was 3.568with the p-value. 05. This model explains 18% of the variation in perception detectedthrough R2 value 0.180.

| Variable | | | |
|--|----------|-----------------|--|
| Variable | No Samp | le (n=173) % | |
| Age in Years | 110 | /0 | |
| 20 - <30 | 34 | 19.7 | |
| | | | |
| 30 - <40 | 66 | 38.2 | |
| 40 - <50 | 60 | 34.6 | |
| 50 - <60 | 13 | 7.5 | |
| Mean ±SD | 36.2 | 23±8.89 | |
| Gender | | | |
| Male | 64 | 37.0 | |
| Female | 109 | 63.0 | |
| Marital status | | | |
| Single | 65 | 37.6 | |
| Married | 92 | 53.2 | |
| Divorced | 11 | 6.4 | |
| Widowed | 5 | 2.8 | |
| Hospital name | | | |
| As-salam hospital | 93 | 53.8 | |
| El-zohor hospital | 42 | 24.2 | |
| El-hayat port-fouad hospital | 38 | 22.0 | |
| Educational level | - 81 | | |
| Nursing diploma | 11 | 6.4 | |
| Technical diploma | 24 | 13.9 | |
| Bachelor degree | 91 | 52.6 | |
| Diploma degree | 29 | 16.8 | |
| Master degree | 4 | 8.1 2.2 | |
| Doctorate degree | 4 | 2.2 | |
| Name of department | 40 | 20.2 | |
| Surgical | 49 | 28.3 | |
| Medical | <u> </u> | <u> </u> | |
| Dialysis Orthopedic | 23 | 13.5 | |
| ICU | 26 | 15.0 | |
| Operating room | 20 | 11.6 | |
| Nursing years of experience | _ * | | |
| 1-10 years | 31 | 17.9 | |
| 11-20 years | 65 | 37.6 | |
| 20-25 years | 59 | 34.1 | |
| More than 25 years | 18 | 10.4 | |
| Mean ±SD | 12.7±9.8 | | |
| Years of experience in your department | | | |
| 1-10 years | 55 | 31.7 | |
| 11-20 years | 65 | 37.6 | |
| 20-25 years | 43 | 24.9 | |
| More than 25 years | 10 | 5.8 | |
| Mean ±SD | 10 | 0.1±6.3 | |

Table (1): Personal and job characteristics of the studied nurses (n=173).

| Low perception Less than 50% | | Moderat | e perception | High perception 75% or more | |
|---------------------------------|--|--|---|--|--|
| | | 50% to le | ss than 75% | | |
| No | % | No | % | No | % |
| 87 | 50.3 | 60 | 34.7 | 26 | 15.0 |
| 40 | 23.1 | 24 | 13.9 | 109 | 63.0 |
| 29 | 16.8 | 77 | 44.5 | 67 | 38.7 |
| 30 | 17.3 | 35 | 20.2 | 108 | 62.5 |
| 34 | 19.7 | 86 | 49.7 | 53 | 30.6 |
| 106 | 61.3 | 49 | 28.3 | 18 | 10.4 |
| 49 | 28.4 | 62 | 35.8 | 62 | 35.8 |
| 18 | 10.4 | 58 | 33.5 | 97 | 56.1 |
| 100 | 57.8 | 40 | 23.1 | 33 | 19.1 |
| 27 | 15.6 | 82 | 47.4 | 64 | 37.0 |
| | | | | | |
| | | | | | |
| 73 | 42.2 | 68 | 39.3 | 32 | 18.5 |
| 37 | 21.4 | 87 | 50.3 | 49 | 28.3 |
| 29 | 16.8 | 82 | 47.4 | 62 | 35.8 |
| | | | | | |
| | | | | | |
| | Less the No Roman Science Scie | Less than 50% No % 87 50.3 40 23.1 29 16.8 30 17.3 34 19.7 106 61.3 49 28.4 18 10.4 100 57.8 27 15.6 73 42.2 37 21.4 | Less than 50%50% to leNo%No 87 50.3 60 40 23.1 24 29 16.8 77 30 17.3 35 34 19.7 86 106 61.3 49 49 28.4 62 18 10.4 58 100 57.8 40 27 15.6 82 73 42.2 68 37 21.4 87 | Less than 50%50% to less than 75%No%No 87 50.3 60 34.7 40 23.1 24 13.9 29 16.8 77 44.5 30 17.3 35 20.2 34 19.7 86 49.7 106 61.3 49 28.3 49 28.4 62 35.8 18 10.4 58 33.5 100 57.8 40 23.1 27 15.6 82 47.4 73 42.2 68 39.3 37 21.4 87 50.3 | Less than 50%50% to less than 75%75%No%No%No 87 50.36034.7264023.12413.91092916.87744.5673017.33520.21083419.78649.75310661.34928.3184928.46235.8621810.45833.59710057.84023.1332715.68247.4647342.26839.3323721.48750.349 |

 Table (2): Legal aspects liabilities dimensions as perceived by studied nurses (n=173).

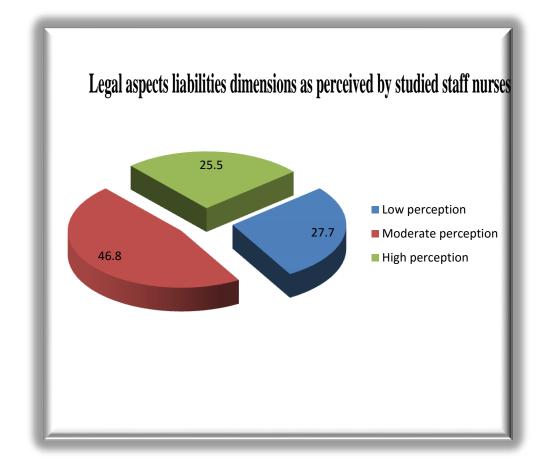


Figure (1): Total Legal aspects liabilities dimensions as perceived by nurses

Table (3): Differences between total nurses' perception toward legal aspects liabilities according to hospitals (n=173).

| Total perception | erception Low | | Moderate | | High | | Mean | Н | (p) |
|----------------------|---------------|------|----------|------|------|------|------|-------|--------------|
| toward legal aspects | No | % | No | % | No | % | rank | | value |
| liabilities | | | | | | | | | |
| As-salm hospital | 22 | 23.7 | 38 | 40.9 | 33 | 35.5 | 95.9 | | |
| (n=93) | | | | | | | | 8.182 | (0.017*) |
| El-zohor hospital | 13 | 31.0 | 21 | 50.0 | 8 | 19.0 | 80.9 | | |
| (n=42) | | | | | | | | | |
| El-hayat hospital | 13 | 34.2 | 22 | 57.9 | 3 | 7.9 | 71.8 | | |
| (n=38) | | | | | | | | | |

H: Kruskal wallis test.

*: Statistically significant at $p \le 0.05$

Table (4): Relation between perception toward legal aspects liabilities and personal characteristics of the studied nurses in terms of age in years, marital status, and educational levels.

| Variable | Mean ±SD | Test of significant | (p) value |
|----------------------|------------|------------------------|-----------|
| Age in Years | | II = 2 011 | (0.702) |
| 20 - <30 | 55.11±10.3 | H ⁼ 3.811 | (0.702) |
| 30 - <40 | 56.16±9.7 | | |
| 40 - <50 | 54.88±9.8 | | |
| 50 - <60 | 58.61±9.6 | | |
| Marital status | | | |
| Single | 55.89±9.3 | H ⁼ 4.784 | (0.572) |
| Married | 56.31±9.4 | | |
| Divorced | 51.54±11.2 | | |
| Widowed | 51.0±13.5 | | |
| Educational level | | | |
| Nursing diploma | 53.45±9.3 | H ⁼ 14.016 | (0.008*) |
| Technical diploma | 51.71±9.4 | | |
| Bachelor degree | 55.96±10.2 | | |
| Diploma degree | 58.03±8.6 | | |
| Master degree | 57.85±6.4 | | |
| Doctorate degree | 55.25±11.3 | | |

*Significant (P<0.05). (H) Kruskal-Wallis tests.

Table (5): Relation between perception toward legal aspects liabilities and personal characteristics of the studied nurses in terms of the department, gender, years of experience in nursing, and experience years in the department.

| Variable | Mean ±SD | Test of significant | (p) value |
|-----------------------|------------------------|-----------------------------|-----------|
| Department | | | |
| Surgical | 55.57±11.1 | - | (0.971) |
| Medical | 57.67±8.2 | H ⁼ 3.391 | |
| Dialysis | 55.91±8.7 | - | |
| Orthopedic | 54.47±9.5 | - | |
| ICU | 52.27±9.2 | - | |
| Operation room | 57.75±9.1 | | |
| Gender | | U = 0.449 | (0.779) |
| Male | 56.76±10.1 | | |
| Female | 55.07±9.3 | | |
| Nursing years of | fexperience | | |
| 1-10 years | 52.67±10.1 | H ⁼ 3.361 | (0.763) |
| 11-20 years | 56.41±8.5 | | |
| 20-25 years | 57.03±9.6 | | |
| More than 25 years | 53.94±11.9 | | |
| Years of experie | nce in your department | | |
| 1-10 years | 56.21±9.1 | H ⁼ 0.764 | (0.993) |
| 11-20 years | 56.12±8.7 | | |
| 20-25 years | 54.95±10.6 | | |
| More than 25 years | 53.40±13.7 | | |

*Significant (P<0.05). (H) Kruskal-Wallis tests. (U) Mann-Whitney test.

| | Unstandardized Coefficients | | Standardized Coefficients | | |
|--------------------------------|--------------------------------|------------|------------------------------|---------|------|
| Model | В | Std. Error | Beta | Т | Sig. |
| 1 (Constant) | 60.123 | 5.172 | | 11.624 | .000 |
| Name of department | 126- | .400 | 023- | 315- | .753 |
| Sex | -1.451- | 1.424 | 073- | -1.019- | .310 |
| Age | 090- | .804 | 008- | 112- | .911 |
| Marital status | -1.786- | .993 | 130- | -1.798- | .074 |
| Educational level | 1.315 | .675 | .142 | 1.949 | .053 |
| Nursing years of experience | .555 | .851 | .052 | .653 | .515 |
| Experience in this department | 747- | .837 | 069- | 892- | .374 |
| Studying legal aspect material | 1.131 | 1.525 | .055 | .742 | .459 |
| R= 0.425 R square= 0.180 | F= | 3.568 | sig.= 0.05* | | |

Table (6): Best fitting multiple linear regression for nurses' perception regarding legal aspects liabilities

DISCUSSION

Respect for patients' rights is one of the most important goals of a health system that will have an essential role in promoting patients' health. Ethics and laws of the health field sector serve as shield protection to maintain the dynamic environment to deliver the services of the health care system in an integrated way. Nurses' knowledge of legal and ethical aspects is critical for all nursing professionals because professional, competent nurses can provide ethical, high-quality nursing care (Aly, El-Shanawany & Ghazala, 2020; Bagherinia, Mohamadkhani, Birjandi, & Tajvidi, 2022).

Nursing as a profession includes a lot of difficulties, challenges, and changes as there is a need for high-quality care and patient confidentiality. These difficulties were associated with modern technology, the rights of patients, and professional or ethical and legal dilemmas. Daily practice of nurses, the nurses are responsible for adhering to professional and ethical practices and providing high standards of care (Julaini, Sanif, & Zolkefli, 2021).

Therefore, it is essential to determine nurses ' perceptions regarding legal liabilities at port said hospitals.

Regarding total legal aspects liabilities as perceived by studied nurses, the current present study revealed that less than half of studied nurses had moderate perception (%46.8) related to total legal aspects liabilities, while about one-quarter of them had high perception (%25.5)and more than one-quarter of them had low perception (%27.7). This result might be due to the need for educational preparation and training programs regarding professional nursing ethics and legal frame in the workplace. This finding is consistent with the study by (Verghese &Jomon, 2016) who conducted a study and represented that about three-quarters of the studied nurses had moderate perception related to total legal aspects liabilities. Also, the result was supported by Ropmay et al. (2021) and showed that more than half of the nurses who participated in the study had fair awareness of legal and ethical issues. On another hand, the finding disagreed with Mohammed et al., (2017) conducted a study and found that less than three-quarters of the nurses who participated in the study had a high perception related to total legal aspects liabilities.

Related to legal aspects liabilities dimensions as perceived by the nurses who participate in the study, the current present study showed that the highest percentage of nurses had a high perception in the following domains malpractice, battery& invasion of privacy (63.0 %, 62.5% & 56.1%) respectively. This may be due to the ability of the nurse as a medical professional to follow the accepted and high standards of practice of his or her profession, resulting in safe care for the patient and the nurse's ability to determine the required type and level of nursing intervention, and implementation an action that did not cause harm to the patient. while the lowest perception was found for defamation of character, informed consent & negligence (61.3%, 57.8% & 50.3%) respectively. This may be explained by the that the study results revealed that nurses were not worried about acts or actions that create ethico- legal dilemmas but they have insufficiently training. Generally, they displayed insufficient skills, knowledge, and perception to express the most common situations related to the law of the health care system they faced during work time, and the training program in ethics and legislation received during a postgraduate course was insufficient to provide them with the sufficient and correct knowledge and information to solve and face the difficulties and challenges. Moreover, this result is supported by a study done by Konkamani (2017) who conducted a study about "nurses' per perceptions regarding ethico- legal" and revealed that less than half of the studied nurses had poor knowledge about dealing with suit prone patients(%21.4), while more than half of the studied nurses had high knowledge about malpractice(%63).

This finding is consistent with the study by Ali, Ali, and Mahmoud (2018) reported that more than two-thirds of nurses had the highest perception regarding malpractice, battery& privacy invasion. On another hand, these results are in disagreement with the study done by El-mawgood and Eid (2018) who conducted a study that illustrated that less than half of the studied nurses had a high perception of informed consent about patients. This difference between the two studies

As regards the relationship between personal characteristics and legal aspects liabilities, the current study represented that no statistically significant relations are found between perception toward legal aspects liabilities and the studied nurses in terms of the department, gender, and nursing years of experience. The current present study is consistent with Begum and Seeralar (2018) displayed that there no statistically significant relations are found between perception toward legal aspects liabilities and the studied staff nurses in terms of the department, gender and nursing years of experience. From another point of view, this result is dissimilar to the study by Mohammadi et al. (2018) showed that there are statistically significant relations between perception toward legal aspects liabilities and nursing years of experience in their department. On the contrary, Koshy (2016) conducted a study showed that a significant association between perception of legal aspects and the following variables (gender, age, professional qualification, education level, and experience).

Moreover, the current study results revealed no statistically significant differences between the status of marriage and perception of legal aspects liabilities among studied nurses. But the result showed that the married nurses had a higher perception than single, divorced, and widowed. Along the same line,) conducted a study that proved that the ethical awareness in married people's mean score was higher than singles.

Concerning the relationship between nurse's educational levels and total perception of legal aspects liabilities among studied staff nurses, the study results proved that there is a statistically significant relationship exists between perception of legal aspects liabilities and the studied staff nurse's educational level of diploma degree who had the highest mean score. This point of view was supported by Koshy (2016) who found that there is a statistically significant relationship exists between nurses' educational level and their perception of legal aspects liabilities.

Also, the study results showed that the nurses with diploma degrees and master's degrees had the highest perception of legal aspects liabilities rather than other educational levels. The cause may be due to the nurses with these two educational levels being prepared through the educational courses that they studied. And may have moderate knowledge about legal liabilities. From another point of view, Belal and Elnady (2017) conducted a study and found that more than two-thirds of the studied technical secondary schools nurses had poor perception, and only 5.8% of studied bachelor nurses had good perception.

Additionally, the current study showed that there are no significant differences between males and females, although more than one-quarter of the studied nurses who have low perception are males while almost half of the studied nurses who have moderate perception are females. As well more than one-quarter of studied nurses who have high perception are males. This results in disagreement with a study by Nouhi, Zoladl, Dehbanizadeh, and Poranfard (2016) conducted a study about" Study of ethics errors in nurses of Shahid Beheshti hospital of Yasuj 2014" and reported that women have better ethical perception than men. The differences between the two studies might be due to the few numbers of males in the study.

Finally, the current study showed that the significant model detected through F test value was 3.568 with the p-value. 05. This model explains that 18% of the variation in perception detected is related to nurses' demographic characteristics. This result is on the same line as Rimal (2020) who conducted a study and pointed out that name of the hospital had a slight positive effect on nurses' perception regarding legal aspects liabilities at a p-value <0.05*. From the researcher's point, this study's difference might be due to different policies and rules in different hospitals. Also, Subedi, Timalsina and Bhele (2018) stated that workshop attendance had a slight positive effect on nurses' perception regarding legal aspects liabilities at a p-value <0.05*.

CONCLUSION

In conclusion, less than half of studied staff nurses had moderate perception related to total legal aspects liabilities, while one-quarter of them had high perception and slightly more than one-quarter had low perception. Also, all nurse's characteristics had no effect on nurses' perception regarding legal aspects liabilities.

RECOMMENDATION

Based on the findings of the study results, the following recommendations were advocated:

- 1. Subjects related to medical and health care field law and practice should be included in the nursing study during years of learning.
- 2. An interdisciplinary system of education should be available to translate a modern advanced approach to education and training on health care field law and matters related to it to enhance safe, complete, competent nursing practice.
- 3. Importance of having nurse consultants for legal issues or legal advisors at the health care field.
- 4. More research should be done to further investigate the factors influencing nurses' perception regarding legal aspects of liabilities.
- 5. This study could be replicated to a larger sample and in different settings to generalize the findings.
- 6. Moreover, in the competitive world and use of advanced technology, nurses have multiple and expanded roles to render high-quality nursing care • To avoid legal suits and to protect clients, nurses should have a good understanding of legal issues, ethical and professional roles, and nursing regulatory mechanism.
- 7. Enroll in an advanced degree nursing program to increase your ability to use critical thinking and problem-solving skills in your practice.
- 8. Provide ways for nurses to appropriately report concerns and helps them protect their licensures and livelihoods.

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إدراك الممرضين تجاه جوانب المسائلة القانونية في مستشفيات بورسعيد العامة

آلاء أحمد محمود فرحات 1 ، سناء عبد العظيم إبراهيم 2 ، هند عبد الله محمد ³ بكالوريوس العلوم تمريض ، جامعة المنصورة ، مصر. ¹ أستاذ إدارة التمريض ، كلية التمريض ، جامعة بورسعيد ، بورسعيد ، مصر. ² أستاذ مساعد إدارة التمريض ، كلية التمريض ، جامعة بورسعيد ، بورسعيد ، مصر. ³

الملخص

تواجه مهنة التمريض العديد من التحديات في الوقت الحاضر ، لذا فإن الممرضات في الممارسة اليومية مسؤولون عن الالتزام بمعايير الممارسة الأخلاقية المهنية. الهدف: هدفت الدراسة الحالية إلى تحديد تصور الممرضات فيما يتعلق بالمسؤوليات القانونية في مستشفيات بورسعيد. التصميم: تم استخدام تصميم بحث وصفي. مكان البحث: تم إجراء ذلك بأقسام مستشفى السلام ومستشفى الزهور ومستشفى الحياة بورفؤاد التابع للتأمين الصحى الشامل بمحافظة بورسعيد. العينات: تم اختيار عينة بإجمالي عدد (173) ممرضة باستخدام تقنية أخذ العينات العشوانية البسيطة. الأدوات: تم استخدام الخصائص الشخصية والوظيفية لمعرفة وآراء المشاركين والممرضات حول المسؤولية الأدوات: تم استخدام الخصائص الشخصية والوظيفية لمعرفة وآراء المشاركين والممرضات حول المسؤولية منهم تصور منخفض لانتهاك الخصوصية. كذلك ، 5.03/ منهم لديهم تصور معتدل فيما يتعلق بالتعامل مع المرضى القانونية. النتائج: أكثر من نصف الممرضات (57.8/) لديهم تصور منخفض للموافقة المستنيرة ، بينما لدى 10.4/ منهم تصور منخفض لانتهاك الخصوصية. كذلك ، 5.03/ منهم لديهم تصور معتدل فيما يتعلق بالتعامل مع المرضى المعرضين للبدلة ، في حين أن 13.9/ منهم لديهم تصور معتدل فيما يتعلق بلماتعالم مع المرضى المعرضين للبدلة ، في حين أن 13.9/ منهم لديهم تصور معتدل فيما يتعلق الشخصية. الخلاصة: المواريزية ، في حين أن ربعهم كان لديه تصور عالو أكثر من الربع بقليل لديه تصور منخفض. التوامل مع المرضى القانونية ، في حين أن ربعهم كان لديه تصور عال وأكثر من الربع بقليل لديه تصور منخفض. التوامات الجوانب والم المرارد مثل استشاريي التمريض القانونيين أو المستشارين القانونيين في المستشفيات ، والتدريب على القانون الطبي والمسائل ذات الصلة لتعزيز ممارسة التمريض الأمنة. أيضا ، يوصي بمزيد من البحث في هذا المجالي

الكلمات المرشدة: الجوانب القانونية ، المسؤوليات ، الممرضات ، الإدراك ، مستشفيات بورسعيد