

Awareness of Medico-Legal Aspects and Documentation amongst Health Professionals in a Tertiary Care Hospital

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Abstract

Background: The professionals working in a hospital, especially the clinical staff will have to deal with many medical cases which have legal implications. Health care providers are at high risk for litigations. Being aware about medico legal aspects and importance of documentation and performing their duties ethically can safeguard themselves against risks of litigation. **Objective:** To assess the awareness among health professionals about legal practices and medical documentation in patient care. **Method:** A cross-sectional study was carried out with the help of a validated and pre-tested questionnaire involving 219 health professionals belonging to different disciplines of allied health sciences and nursing at a tertiary care hospital in south India. **Result:** The study showed that the professionals who were involved indirectly, such as pharmacists and health information management professionals scored less than 50% of the total knowledge score while those involved in direct clinical care such as physiotherapists and nurses scored more than 50% of the total knowledge score, and hence better. Similarly professional with three or more years of experience scored above 50% and hence better than professionals with lesser experience. The responses indicated that, the respondents were only able to attain a score around 50% of the maximum attainable. **Conclusion:** The findings indicate there is a need of bringing on the awareness about the various aspects of medico-legal cases in patient care. This is not only for professional safety but also for the safety of patients at large. Hospital and their administrators should regularly conduct sensitisation programs on medico legal aspects in patient care and importance of documentation

Keywords: Medico-legal case, Consent, Confidentiality, Medico-legal documentation.

Introduction

Over the centuries, the medical care given to people were subjected to many legal, religious and social restrictions. At present times, the medical care shall be given and practiced by only qualified healthcare professionals in most countries, if not all⁽¹⁾.

There can be instances where the professional discretion of a physician or other healthcare professional may contradict with autonomy of the patients. This puts forth a fundamental need for professionals involved in patient care to learn the skill and acquire knowledge related to ethics and legal requirements of their practice. This can be argued to be as fundamental as knowledge in basic sciences or clinical skills⁽²⁾. The healthcare professionals of a hospital have several lawful commitments in the execution of their duties. It is hence,

vital that healthcare professionals be vary and in full understanding of their obligations and fulfil them to the best of their capacity.

Like physicians, the legal responsibilities of the nurses also begin with their professional practice. Their license bears out that they are capable and qualified under the law to practice their profession. It is the proof that they are now able to give holistic and quality care to their clients as a professional nurse. The same applies for other allied health professionals, there are certain standards and codes of practice that is expected of them while they are at work. Their ignorance, much as a physician's or nurses' may have serious implication on the health and well-being of the patient. Hence, apart from the physicians, the nurses and allied health professionals should also take liability and accountability for their actions. In recent past there has been increasing

pressure on hospital facilities due to the media attention it receives. In addition to this, the ever increasing complexity of therapeutic and diagnostic methods and lack of competency thereof, has together been responsible for many medico-legal battle the hospitals had to face and be accused of medical negligence in providing the care⁽³⁾.

The tendency to neglect dealing with MLC by the hospitals and the healthcare professionals maybe due to many inconveniences such as dispute, and contact with the court of law etc. This will only further complicate things. Due to such inconveniences, the hospitals may have a reluctance to deal with MLC, and avoid such cases, or ‘get rid of’ them as fast as possible⁽⁴⁾. There aren’t many legal suits that happened because of malpractice or negligence of nurses in India. This is believed to be largely due to the perception of the patients in India that the medical liability lays completely on doctors^{(5) (6)}.

But, with ever-increasing availability of information regarding health over the internet as well as increased accessibility to internet for the consumers, such cases of negligence come to light more often. To keep in pace with such advancements and to confront to the changing situation in healthcare, it is important that the nurses and all healthcare professionals are trained and prepared with refreshed knowledge on laws with regards to health care. This will improve safety of health care delivery in an impartial and institutionalised way⁽⁷⁾.

Method

This is a cross-sectional study carried out between January and June 2017, in a tertiary care hospital in

South India. A pilot study was conducted amongst the 20 potential participants of the target population of nurses and allied health professionals of the hospital. The sample size was determined to be a minimum of 182 professionals ((N) =). The sampling method used was convenience sampling method and data was collected using a validated, self-administered questionnaire which assessed the awareness on medico legal aspects and documentation. The study, including the questionnaire, was approved by the Institutional Research Committee. The questionnaire contained two sections, the first section contained demographic data such as profession, qualification and years of professional experience.

The second section contained questions to measure the awareness of medico-legal aspects and documentation. The questions in the questionnaire were divided into five domains: Confidentiality, Negligence, Consent, Medico-legal practice, and Medico-legal documentation. The questionnaire was obtained from the respondents after they were briefed about the study and a written informed consent of the same obtained from each respondent. Mean and frequency was calculated for each group of professionals based on their given demographic data. The data was analysed using SPSS version 20. Chi-square test was used as test of significance done to correlate results with demographic data.

Results

A total of 219 professionals participated in the study from various disciplines of allied health and nurses. Their scores with respective scores are given in the table below. (table 1)

Item	Category	Frequency	Percentage (%)	Mean score (Maximum 19)	Percentage (%)
Profession	Nurse	173	79	9.7	51
	Physiotherapists	7	3.2	10.4	54.9
	Pharmacists	8	3.65	9.6	50.5
	Medical Imaging Technicians	21	9.59	7.6	40.1
	HIM Professionals	10	4.57	9.4	49.5
	Total	219	100	N/A	N/A
Experience	1-3 years	59	26.94	8.6	45.3
	4-6 years	54	24.66	10.4	54.7

Cont... Table 1: Scores w.r.t Demographic Data of the Respondents

	7-9 years	40	18.26	10.5	55.3
	10 or more years	66	30.14	9.4	49.5
	Total	219	100	N/A	N/A
Qualification	Diploma	171	78.08	9	47.4
	Undergraduate	41	18.72	9.7	51.1
	Postgraduate	7	3.2	10	52.6
	Total	219	100	N/A	N/A

Aspects Related to Confidentiality:

Of the two questions asked related confidentiality, the question on who can access patient information from medical record was found to be statistically significant in terms of profession (p=0.020), while question on sharing patient information to a third party was found to be statistically significant terms of qualification (p=0.005).

Table 2: Confidentiality (*p ≤0.005)

Serial No.	Item	Percentage		p-Value		
		Right	Wrong	Profession	Qualification	Experience
1	Who can access the patient information from the medical record?	58.0	42.0	0.020*	0.127	0.055
	Answer: All the healthcare professionals relating to the care of a particular patient					
2	In which of these cases can MLC patient’s health information can be given to a third party:	46.6	53.4	0.090	0.005*	0.104
	Answer: Injury resulting from a suspected criminal act, risk to public safety, Notifiable diseases					

Aspects Related to negligence:

Of all the questions asked related to the medical negligence, all of them varied significantly in terms of profession (p<0.001).

Table 3: Negligence (*p ≤0.005)

Serial No.	Negligence	Percentage		p-Value		
		Right	Wrong	Profession	Qualification	Experience
1	Which of following laws laws does medical negligence come Under?	53.0	47.0	<0.001*	0.143	0.001*
	Answer: Civil laws, Criminal laws, Consumer Protection Act					
2	When can a nurse be attributed to negligence:	62.1	37.9	<0.001*	0.000*	0.298
	Answer: Their own acts which could be acts of commission or nomission.					
3	Which of these can be criminal negligence by the healthcare provider?	57.1	42.9	<0.001*	0.012*	0.068
	Answer: Giving wrong blood					

Aspects Related to consent:

In aspects related to consents, the answers varied statistically significantly over across all the questions in terms of profession ($p < 0.001$).

Serial No.	Consent	Percentage		p-Value		
		Right	Wrong	Profession	Qualification	Experience
1	Which of these circumstances require no consent?	43.8	56.2	<0.001*	0.938	0.144
	Answer: While treating a patient on court order OR Medical emergency					
2	The informed consent of the patient or the legal guardian is required to do any procedure on the patient, except if the patient is under the custody of police for a criminal offence:	51.1	48.9	<0.001*	0.581	0.032
	Answer: True in all cases					
3	In cases of children under 12 years of age admitted as MLC, the treatment/ procedure/examination should be treated with consent.	56.2	43.8	<0.001*	0.008*	0.005
	Answer: True, except in emergency					

Aspects Related to medico-legal practice:

All the questions related to medico-legal practice was statistically significant in terms of profession ($p < 0.005$).

Serial No.	Medico-legal practice	Percentage		p-Value		
		Right	Wrong	Profession	Qualification	Experience
1	If a patient or his relative does not let the MLC to be registered, then:	37.2	62.8	<0.001*	0.080	0.002*
	Answer: The police should be informed.					
2	Legal action when an MLC patient dies:	52.5	47.5	<0.010*	0.841	0.168
	Answer: The body should be handed over to the police.					
3	When are collection and preservation of exhibits relevant to a case?	84.0	16.0	<0.001*	0.001*	0.518
	Answer: All the cases including suicide cases, road accident cases and murder cases					
4	For how long should a MLC record be stored in a hospital?	64.0	36.0	<0.001*	0.222	0.004*
	Answer: For indefinite period					
5	The legal action if an MLC patient absconds hospital should be:	58.9	41.1	<0.001*	0.078	0.09
	Answer: The police should be informed.					
6	Legal action when an MLC patient decides to leave the hospital:	35.6	64.4	<0.001*	0.376	0.113
	Answer: The police should be informed.					

Aspects Related to documentation:

In questions related to medical documentation, awareness regarding procedure for discharging of an MLC patient was found to be statistically significant in terms of profession (p=0.014) and qualification

(p= 0.017). Awareness regarding the procedure for documenting dying declaration by the patient was also found to be statistically significant in terms of profession (p=0.002), while years of experience was significantly associated with awareness regarding safe storage of medico-legal register (p<0.001).

Table 6: Documentation (*p ≤0.005)

Serial No.	Medical Documentation	Percentage		p-Value		
		Right	Wrong	Profession	Qualification	Experience
1	Procedure while discharging an MLC patient:	57.5	42.5	0.014*	0.017*	0.219
	Answer: Intimation should be sent to police and also the patient should be discharged with discharge documents.					
2	What is procedure to be done in case of dying declaration by the patient?	47.9	52.1	0.002*	0.366	0.124
	The dying declaration is recorded in the presence of magistrate or a medical officer in the presence of two independent witnesses.					
3	When shall a medico-legal register be kept safe and secure under the lock and key?	76.7	23.3	0.236	0.585	<0.001*
	Answer: Always					

Discussion

In Confidentiality aspect, only 40 to 50 percent of the participants were able to answer correctly. This clearly shows a lack of awareness in terms of respecting the confidentiality of the patients. This result was in contrast with the another similar study “patient communication, confidentiality and consent: radiology policy and practice in Europe”, where the result showed that more than three quarters of the national society was aware and indicated about the national policy about confidentiality of the patient information (8). This study was again in contrast with another study titled “Medical and legal professionals’ attitudes towards confidentiality and disclosure of clinical information in forensic settings: a survey using case vignettes”, where the medical professionals, on the whole, tend to respect the patient confidentiality (9).

In consents, all of the responses was found to be statistically significant in terms of profession and in terms of years of professional experience. In a similar study conducted in Europe with relation to practice and policy regarding consent in patient-care, it was found

that a that the professionals were aware and had routinely obtained a consent 72% of the time which was in contrast to the mixed response of 40-60 percent obtained in this study for questions related to consent (8). In another survey conducted in the UK, regarding the consent law in medical practice, 64% of the surgeons were “a little uncertain” that their consenting process meets the legal requirements (10).

In case of questions which focused on the legal practices in patient care. The results were again varying across questions. Secondly, 86% of questions focused on this area was statistically significant in terms of profession. The lack of awareness is evident in these answers.

It is necessary that the professionals are made aware of the rules and legislation of the country they practice in, both during the course of their professional degree and through the continual education in the institutions/ hospitals they work.

In a similar study carried out on the knowledge of staff nurse regarding legal and ethical responsibilities in

the field of psychiatric nursing in SMS Medical College Jaipur, Rajasthan⁽¹¹⁾. The study revealed that lion's share 90% of the nurses' had only moderate level of knowledge in the legal and ethical responsibility in the field of psychiatric nursing. The 10% of the nurses had high level of knowledge while none of the nurses fall into the class of low level of knowledge.

In a survey conducted in the UK, more than 92% of surgeons surveyed believe that landmark cases and changes in law etc. regarding legal practice should be discussed through professional bodies and circulated locally⁽¹⁰⁾. In another survey conducted amongst junior doctors in three UK hospitals, the majority were unfamiliar with medico-legal and ethical terms relevant to daily practice. They also felt their postgraduate training in these areas was inadequate⁽¹²⁾.

In another study done by Sharmil et al., in Malaysia, revealed that just 11.7% nurses had the normal or expected adequate level of knowledge on Legal Aspects of Healthcare, while remaining 88.3% nurses had a moderate level of knowledge. The study presumed that they require greater enhancement of knowledge through continuing nursing education⁽⁷⁾.

The results showed that there was high frequency of the responses being significant with respect to profession. It is evident from the result that professionals such as nurses and physiotherapists who were involved in directly involved in the clinical care showed more awareness than the professionals who were involved indirectly.

Conclusion

This study and similar studies in this field have shown that the professionals lack awareness in many aspects of medico-legal practice in healthcare such as confidentiality, medical negligence and medico-legal documentation et cetara. Such indication of lack of awareness is alarming and coupled with the trend of increased informed patients, it calls for bring major changes in how these professionals are trained as well as how the legislation and legal procedures are put to practice⁽²⁾.

Conflict of Interest: The authors had no conflict of interest.

Limitation:

This study cannot be generalized because this study was done with a limited number of professionals in a particular hospital. Many allied health professionals who responded believed that it was not part of their routine job to know about MLC.

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References

1. J.Rai DJ, V.Acharya DR, Dave DD. Knowledge and awareness among interns and residents about medical law and negligence in a medical college in Vadodara - A questionnaire study. *IOSR Journal of Dental and Medical Sciences (JDMS)*. 2013; 3(4): p. 32-38.
2. Mayeda M, Takase K. Need for enforcement of ethicolegal education – an analysis of the survey of postgraduate clinical trainees. *BMC Medical Ethics*. 2005.
3. Yadav M, Rastogi P. A Study of Medical Negligence Cases decided by the District Consumer Courts of Delhi. *J Indian Acad Forensic Med*. 2015; 37(1): p. 50-55.
4. Singh AK, Singh K, Verma A. Study of Medico-legal Case Management in Tertiary Care Hospital. *J Indian Acad Forensic Med*. 2011; 3(4): p. 337-342.
5. Rao SVJ. Medical negligence liability under the consumer protection act: A review of judicial perspective. *Indian Journal of Urology*. 2009;(12): p. 361-371.
6. Hemant Kumar GKJaDRM. Legal Awareness and Responsibilities of Nursing Staff in Administration of Patient Care in A Trust Hospital. *Journal of Clinical and Diagnostic Research*. 2013;(12): p. 2814-2817.
7. Sharmil H. Awareness of Community Health Nurses on Legal Aspects of HealthCare. *International Journal of Public Health Research*. 2011;(Special Issue): p. 198-201.
8. European Society of Radiology (ESR). Patient communication, confidentiality and consent: radiology policy and practice in Europe. A survey by the European Society of Radiology. *Insights Imaging*. 2013; 4(2): p. 153-156.
9. Bruggen MC, Eytan A, Gravier B, Elger BS. Medical and legal professionals' attitudes

- towards confidentiality and disclosure of clinical information in forensic settings: a survey using case vignettes. *Medicine, Science and the Law*. 2013; 53(3).
10. O'Brien J, Natarajan M, Shaikh I. A survey of doctors at a UK teaching hospital to assess understanding of recent changes to consent law. *Annals of Medicine and Surgery*. 2017;(18): p. 10-13.
 11. Rajesh Kumar SMRK. Knowledge of staff nurses regarding legal and ethical responsibilities in the field of psychiatric nursing. *Nursing and Midwifery Research Journal*. 2011;(7): p. 1-11.
 12. Shibu P, Subramonian S, Suresh M, Vindlacheruvu M, Cheeroth S, Myint P. Junior doctors' awareness of terminology relating to key medico-legal and ethical principles: a questionnaire survey. *Journal of Royal College of Physician*. 2008; 8(2): p. 231-232.