

The Assessment of Patient Rights in Maternity Ward in Kashan Hospital from Perspective of the Patients

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Abstract: Patient of rights compliance improved quality of health care. Due to this study was not performed, this research is necessary. The aim was the assessment of patient rights in maternity ward in Kashan hospital from perspective of the patients. This study was a descriptive-analytic. The samples consisted of 150 patient that were in post partum ward in Kashan hospital. Data were gathered by a questionnaire that was based on the patient's bill of rights was designed. Data were analysed by SPSS Software. The mean of age in this patient was 29/4 years and the most of them have elementary education (40%) and too most of them were housewife (97%). The results showed that 43% of the subjects claimed that their patient about the bill of rights is not respected vs. 39% dissatisfied on the issue and claimed that the bill of rights patient compliance is not about them and 18% also had no comment in this context. Lowest patient satisfaction was about educational activities of the hospital, so that most patients claimed that the education activities on patient desire and patient satisfaction is not considered. This study shows that patient's rights charter in the labor ward Kashan is not fully respected and this study compared to other studies done in other ward has been lower percentage of extra shows. Considering that midwives less than nurses and doctors trained, it is recommended that authorities to adopt measures in this field. And given that the patients did not satisfaction about presence of student, student performance should be the organizing.

Key words: Right, patient, post partum ward, compliance, satisfaction

INTRODUCTION

The need to promote the rights of patients and health care providers is priority of health system and one of indicators of health status in society. The patient's rights can be defined as one of the main topics in standard of clinical services (Joolaee and Hajibabae, 2012).

The World Health Organization (WHO) considers patient rights as set of rights that individual have in health system and health care providers should observed. Health care system and legal system of each country should ensure that pregnant women have access to the best treatments and care and correct information in health (Joolaee and Hajibabae, 2012).

Doctors and midwives should will meet one of the most basic needs of women that is promotion and hold health of pregnant women (Khodakarami and Jonnesari, 2008). One of rights pregnant women and their families to have awareness and full information from advantages and disadvantages of different treatment methods and should

be the informed women from treatment and diagnosis and benefit and complication of treatment (Khodakarami and Jonnesari, 2008). Hospital Association of America presented a bill of rights for patients and this bill have 12 right for patients that this bill include issues about confront patients with their health care needs (Atashkhaneh, 2001). Charter of Patient Rights drafted in Iran on 1381 by the Ministry of Health and Medical Education Department and was sent to the medical center.

Given the importance of pregnant women's rights and given that this research was not performed in pregnant women, researchers decide to research about patient rights in maternity ward in Kashan hospital from perspective of the patients.

MATERIALS AND METHODS

This study was a descriptive-analytic and environmental research was Shahid Beheshti and

Table 1: Level of patient satisfaction from rights patient charter based on principles rights patient

Principles rights patient	Perspective of the patients (%)		
	Satisfied	Unsatisfied	No coment
Treatment and care with respect	69	16	5
To know the location of the hospital	50	35	15
To know the name of physicians	75	11	4
To know nurses and other health care	23	62	15
To get information on the diagnosis and treatment	50	45	5
To get information from your doctor before the examination and treatment	48	32	2
Do personal satisfaction to the end of treatment	58	32	10
To ensure the confidentiality of medical records	52	30	18
To ensure the confidentiality of the doctor	54	32	18
Permission from the patient about the people who do not participate directly in the healing process	61	28	11
To ensure from access to physicians during hospitalization	40	46	16
To ensure from access to care physician after discharge	42	30	28
To ensure from access to other health care members during hospitalization	41	30	29
To ensure from access to other health care members during after discharge	35	45	20
Satisfaction from educational activity	9	59	32
Satisfaction from research activity	18	80	2
With deployment, information from the medical center medical skill	18	20	62

Shabihkhani hospital. This study was post partum of this hospital and research sample was women that hospitalize in postpartum ward and delivered cesarean section or normal delivery. Tool of information gathering was questionnaire that this questionnaire was designed based on the Charter of Rights which was adjusted by the Department of Ministry Health because questionnaire was based on Charter patients' rights, there was not need for reliability and validity.

Questionnaire include two ward: demographic ward and question about right patients. The questions were designed to be closed and minimum score was zero and maximum score was 17.

The sample size was 150 that number of samples was determined according to the percentage of patients admitted to hospital: 110 person Shabihkhani and 60 person Shahid Beheshti.

Researcher to go to the post partum of hospital and select sample of research with easy sampling and after obtaining informed consent from them completed questionnaire and finally data were analysed by SPSS Software Version 18.

RESULTS AND DISCUSSION

Results showed that the mean age of subjects was 29.4 years between from 18-40 years. The most of them were elementary education (40%) and housewives (97%) and their delivery was normal (65%).

In this study, 43% of participants claimed that their rights will be respected. In contrast, 39% were dissatisfied about it. They claim that their rights are not respected and 18% of patients also had no idea about this. Table 1 shows level of patient satisfaction from rights patient Charter based on principles rights patient.

Table 2: Level of patient satisfaction from rights patient charter based on demographic information

Variables	Subgroup	Satisfaction (%)
Age	<20	48.20
	20-25	58.20
	25-30	47.32
	30-35	60.30
	35-40	41.00
Education	Elementary	49.13
	Guidance	51.00
	High schoole	51.50
	University	53.86
Work	Employe	40.80
	Housekeeper	46.20
Delivery mode	CS	46.40
	NVD	48.21

The highest satisfaction was about questions 3 (like to know the name of physicians 75%), 1 (care and treatment with respect 69%), 2 (Permission from the patient about presence individual who do not participate directly in the healing process 61%).

The lowest satisfaction was about questions 15 (consent of hospital educational activities 9%), 16 (consent of hospital research activities 18%), 4 (to know the name of nurses and other health care team members 23%) and 17 (about dispatch, 18%).

Table 2 shows level of patient satisfaction from rights patient charter based on demographic information that there was not relationship between demographic information and level satisfaction.

CONCLUSION

The results of this study showed that level respect of patients rights from perspective of the patients in post partum ward in Kashan was 43%. That this level in (Rabiei and Rangraz, 2005) study was 67.7% Ghasemi (1998) was 57.5% (Vaskoe and Karimi, 2009) and in was 53% (Ranjbar *et al.*, 2010).

Rights of patients in the study was significantly lower than other studies that it is probably due to the different environments because the study was to examine only part of the delivery. And so far, no study has examined in maternity wards that we compare with that. Perhaps the low satisfaction in maternity and labor ward was due to midwives are less trained than other medical staff in this field and no study on knowledge and practice of midwives in patient rights in Iran.

In the study, lowest satisfaction percent was about educational activity. In study of Ranjbar *et al.* (2010), 35% of students had poor knowledge of patients' rights. It is suggested that students and instructors should justified with this problem and about patient researchers should consider cure problem at first and then education problem and each activity on patients should be conditioned to the consent of they.

And if the patients do not reception treatment or educational activity, researchers should stop activity and in addition in the course of medical ethics, patient rights should include and students to acquire the necessary information in this regard. On the other hand, patients must also be justified in this regard that in educational hospitals, students need to learn information on hospital.

In this study, patient satisfaction level from research activity was very low. It is suggest exact monitoring in this field and each activity on patients should be conditioned to the consent of they.

In the study, lowest patient satisfaction level after educational and research activities was related to the question was 17 (about dispatch) that probably due to low need to dispatch because most patients do not have idea about this problem and only 20% disagreed with this question.

In the study, there was not relationship between the level of satisfaction of patients' rights and demographic information while in Kalrozi *et al.* (2010) study there was relationship between the level of satisfaction of patients' rights and education.

Finally, in this study, satisfaction level patients from patient charter rights in maternity ward from perspective

of the patients is not acceptable that authorities should take all necessary measures to increase the satisfaction level of patients especially in education and research.

In addition, given that midwives lower than nurses and doctors are training. Researchers suggest that authorities should take all necessary measures in this regard and to be held courses and workshops and seminars in this area. Finally, given that the patient right is somewhat different in different patients, researchers suggest patient right design for any ward.

For example in the maternity ward, patients have under rights: for example she has the right to see her baby immediately after birth, she has the right to learn the various methods of reducing pain labor or she has the right to see her husband in labor.

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