

Determining the Relationship between Nurses' Professional Ethics and Observance of Nursing Care Standards

Ghassem Abedi¹, Farideh Rostami^{2*}, Aliasghar Nadi³ and Nasim Taheri⁴

¹Department of Health Care Management, Health Sciences Research Center, Faculty of Health, Mazandaran University of Medical Sciences, Sari, Iran; lq134589@yahoo.com

²MSc in Health Care Management, Health Sciences Research Center, Faculty of Health, Mazandaran University of Medical Sciences, Sari, Iran; rostamimaskopaii@gmail.com

³Health Sciences Research Center, Mazandaran University of Medical Sciences, Sari, Iran; statistic.nadi@gmail.com

⁴Bu Ali Sina Hospital, Mazandaran University of Medical Sciences, Sari, Iran; ijohssari@gmail.com

Abstract

Background and Objectives: As the largest group of healthcare providers and as professional individuals, nurses need to learn how to show ethical behavior in educational environment, which leads to an increase in wellbeing indices and patient satisfaction. Therefore, the present study was aimed at determining the relationship between the nurses' professional ethics and observance of standards of nursing care in Bu Ali Sina Hospital, Sari in 2013-2014. **Materials and Methods:** The statistical population of the present descriptive-analytical study consisted of all 144 nurses working in Bu Ali Sina Hospital, Sari, Iran. They were selected as the study sample based on Krejcie and Morgan Table. A researcher-designed instrument was employed in order to collect the required data. Descriptive statistics (mean and standard deviation) and inferential statistics (one-sample t-test) were employed to analyze the data. **Results:** The results of the study indicated that there was a significant relationship between professional ethical learning and standards of nursing care. Statistically, the collected data rejected the null hypothesis (H_0) at a confidence level of 95% ($\alpha = 0.05$) and proved the study hypothesis. In other words, it can be claimed that there was a significant difference between the sample and the theoretical means. **Conclusion:** Since there is no appropriate relationship between ethical learning and standards of nursing care, it is necessary to evaluate the standards of nursing care and teach ethical principles constantly.

Keywords: Care, Hospital, Nurse, Professional Ethics, Standard

1. Introduction

Success in an organization is the result of applying professional ethics. Weakness in the system of ethics and tendency toward mistrust lead to a decrease in communications and an increase in organizational loss, and the management approaches retrospective control. Therefore, the organization will become negative, and professional ethics can play the role of a catalyst to rationalize the organization based on a humanistic attitude. In fact Professional ethics is an intellectual process which is aimed at actualizing what values should be developed and when they should be maintained^{1,2}. Different ethical principles, rules, and standards entitled "codes of professional ethics"

or "ethical charters" are developed for many professions and jobs at organizational, national, and even global levels, and the owners of the professions need to abide by them. It seems that learning and applying ethics is more necessary in nursing than other professions because nurses are the largest group of healthcare providers in the health care system and their spiritual behavior along with responsibility can play an effective role in recovery of the patients³, hence legally and morally, they have to be responsible to the quality of care offered⁴. Therefore, nursing is based on ethics. Observance of ethical principles in nursing profession leads to improved nursing services, and improved quality of nursing service can have a significant effect on patient's recovery. In clinical nursery,

*Author for correspondence

Jormsri considers nursing care as a set of three major principles: ethics, clinical judgment, and care⁵. Studies indicated that all nurses, regardless of their specialty, need training and guidance about clinical and ethical decision making. Availability of ethical guidelines can enhance the quality of the nurses' performance in their profession and cause the integrity of knowledge-based performance that is based on ethical teachings in different situations⁶. In this regard, Kyle identified nursing care and performance as a complicated phenomenon and suggests that care process consists of ethical, cognitive, and emotional components. Moreover, the nurses' ability to make appropriate ethical decisions and follow a consistent pattern of professional ethics is necessary for acquiring the required training and knowledge in regard with ethical issues⁷. In their study, Patenaude et al. concluded that ethical sensitivity was more among senior students than freshmen, which can be attributed to the effect of training and interacting with clinical environment on observance of ethical and professional standards⁸. Moreover, Auvinen et al. studied the ethical judgment of freshmen and senior nursing students in Finland and the effect of ethical training on ethical judgment ability. They concluded that students who had practically encountered with ethical problems had better judgment compared to those who had not experienced such problems. In this study, senior students had better judgment than freshmen, and there was a significant difference between the two groups. This study indicated that training practical ethics can affect the students' ethical judgement⁹. Other researchers have highlighted the effect of training on ethical sensitivity. They believed that the lack of ethical training could impede the development of ethics in profession and ethical sensitivity⁹⁻¹³. The study conducted by Wehrwein indicated that training ethics was effective in students' awareness of ethical issues and their application in working environment. Moreover, the capacity to make ethical decisions was higher among students who had passed Ethics course than those who had not¹⁴. Rodmell considered curriculum-based ethical teachings as effective factors in forming the individuals' attitude, increasing their knowledge, and creating a framework for discussion and criticism. He stated that ethical knowledge is an important issue in nursery and that implementing ethical issues in curricula can enhance ethical problems and judgment¹⁵. In a qualitative study was aimed at investigating and describing B.Sc. nursing students' experience of internalized values and practical adherence to professional ethics, Kelly concluded that teaching the principles

of professional ethics had a remarkable effect on forming professional ethics among nursing students¹⁶. After the issue of professional ethics was explained and the importance of observing nursing standards was justified through the above mentioned points, the present study was conducted in order to come up with a better understanding of the relationship between professional ethics teaching among nurses and observance of nursing standards based of the managers' views in order to explain and determine this relationship because nurses account for a large portion of the health care providers and play an important role in quality of health and medical care. Moreover, knowledge about ethical criteria is an effective factor in providing quality health care.

2. Method

In regard with its objectives, the present study was an applied, descriptive, and analytical research. It was carried out in order to determine the relationship between the nurses' knowledge of professional ethics and the observance rate of nursing care standards from the perspective of hospital managers in 2013-2014. The study consisted of nurses in Bu Ali Hospital of Sari. Inclusion criterion included a minimum experience of three years in hospital, and exclusion criterion was failure to respond to all items of the questionnaire. The size of the study sample was determined to be 144 nurses based on Krejcie and Morgan Table. They were chosen using stratified random sampling (each specialized ward was considered as stratification). The study instrument was a researcher-designed questionnaire measuring the nurses' professional ethics in four domains: specialized and clinical (5 items), nurse as managers (2 items), nurse as instructor (3 items), and nurse as researcher (3 items) which were designed on three scales of weak, average, and excellent.

The inventory for observance of nursing standards covered three domains: a. structure in 3 dimensions: standards of organizational management and leadership, human resources and manpower, and expenses and facilities. b. process in 13 dimensions: examining and evaluating, diagnosing and identifying the result, planning, carrying out clinical measures and administering, evaluating, supporting patients and their well-being, establishing effective communication, cultural sensitivity, recording and report writing, patient's movement, nutrition, water and electrolytes, individual sanitary, security, and evaluating the risk.

In order to determine the reliability of the questionnaire, 30 copies of it were given to a group of nurses, who completed them, and the results were used Cronbach's alpha, and the total reliability was calculated to be 0.88. In order to analyze the collected data, descriptive statistics (frequency, frequency percentage, histogram, measures of central tendency (mean), and distribution index of standard deviation) and inferential statistics (Kolmogorov-Smirnov test for normality of the data, one-sample T-test, and parametric tests) were employed.

3. Results

As indicated in Table 1, all variables are normal; therefore, they were examined using parametric tests. In so doing, one-sample T-test was employed in order to examine the state of the study variables. Since the items were based on a 5-point scale (very low, low, average, high and very high), the calculated means were compared with the constant value of 3 (mean, median or average). The null hypothesis was the equality of the mean with 3, and when

Table 1. The normality test of the study variables

Variables	Kolmogorov-Smirnov Statistic	Sig.	Test Result
Managerial Standards and Organizational Leadership	0.59	0.87	Normal
Human Resources	0.89	0.39	Normal
Expenses and Facilities	0.49	0.96	Normal
Structure	0.78	0.57	Normal
Clinical Specialty	0.59	0.87	Normal
Nurse as a Manager	0.48	0.97	Normal
Nurse as an Instructor	0.53	0.93	Normal
Nurse as a Researcher	0.57	0.89	Normal
Nurses' Professional Ethics Knowledge	0.71	0.69	Normal
Examination and Evaluation	0.76	0.60	Normal
Specification of the Result	0.51	0.95	Normal
Planning	0.4	0.99	Normal
Clinical Measures and Administration	0.43	0.99	Normal
Evaluation	0.74	0.64	Normal
Support and Well-being of the Patient	0.81	0.51	Normal
Effective Communication	0.65	0.78	Normal
Cultural Sensitivity	0.89	0.40	Normal
Recording and Report Writing	0.89	0.40	Normal
Patient's Movement	0.75	0.61	Normal
Nutrition	0.88	0.42	Normal
Water and Electrolyte	0.56	0.90	Normal
Individual Sanitary	0.65	0.79	Normal
Security and Risk Evaluation	0.69	0.72	Normal
Process	0.51	0.95	Normal
Patient's Satisfaction	0.57	0.89	Normal
Avoiding and Preventing the Occurrence of Complications and Events	0.66	0.76	Normal
Result	1.00	0.26	Normal

the calculated t was high or the sig value was lower than 0.05, the null hypothesis was rejected.

As observed in Table 2, the results of one-sample T-test and comparison between the obtained means indicated

that the variable mean of management standards and organizational leadership was 3.24, SD was 0.60, t value was 4.87, and sig. was lower than 0.05; therefore, the null hypothesis was rejected. As a result, management

Table 2. Examining the state of the variables based on one-sample T-test

Variables	The Constant of Test 3					Test Result	State
	Mean	SD	t-statistic	df	Probability Value		
Managerial Standards and Organizational Leadership	3.24	0.60	4.87	143	0.001	Rejected	Above Average
Human Resources	3.05	0.54	1.28	143	0.202	Accepted	Average
Expenses and Facilities	3.36	0.89	4.87	143	0.001	Rejected	Above Average
Structure	3.22	0.40	6.78	143	0.001	Rejected	Above Average
Clinical Specialty	3.05	0.62	1.12	143	0.264	Accepted	Average
Nurse as a Manager	2.81	0.90	-2.41	143	0.017	Rejected	Below Average
Nurse as an Instructor	2.43	0.97	-6.97	143	0.001	Rejected	Above Average
Nurse as a Researcher	3.58	0.41	16.91	143	0.001	Rejected	Above Average
Nurses' Professional Ethics Knowledge	2.97	0.39	-0.77	143	0.442	Accepted	Average
Examination and Evaluation	3.12	0.70	2.10	143	0.037	Rejected	Above Average
Specification of the Result	3.07	0.71	1.33	143	0.183	Accepted	Average
Planning	3.32	0.65	5.95	143	0.001	Rejected	Above Average
Clinical Measures and Administration	3.11	0.75	1.86	143	0.065	Accepted	Average
Evaluation	2.81	0.76	-2.98	143	0.003	Rejected	Above Average
Support and Well-being of the Patient	2.83	0.53	-2.98	143	0.003	Rejected	Above Average
Effective Communication	2.79	0.47	-5.14	143	0.001	Rejected	Above Average
Cultural Sensitivity	3.03	0.45	-0.87	143	0.383	Accepted	Average
Recording and Report Writing	3.18	0.43	5.02	143	0.001	Rejected	Above Average

(Continued)

Table 2. Continued

Variables	The Constant of Test 3					Test Result	State
	Mean	SD	t-statistic	df	Probability Value		
Patient's Movement	2.94	0.55	-1.14	143	0.254	Accepted	Average
Nutrition	3.29	0.58	6.06	143	0.001	Rejected	Below Average
Water and Electrolyte	2.93	0.72	-1.12	143	0.262	Accepted	Average
Individual Sanitary	3.19	0.63	3.66	143	0.001	Rejected	Below Average
Security and Risk Evaluation	2.92	0.68	-1.32	143	0.186	Accepted	Average
Process	3.04	0.16	3.27	143	0.001	Rejected	Above Average
Patient's Satisfaction	2.86	0.66	-2.37	143	0.019	Rejected	Below Average
Avoiding and Preventing the Occurance of Complications and Events	3.18	0.67	3.32	143	0.001	Rejected	Above Average
Result	3.02	0.50	0.66	143	0.504	Accepted	Average

standards and organizational leadership were higher than average. The mean of human resources was 3.05, SD was 0.54, t value was 1.28, and sig. value was over 0.05; therefore, the null hypothesis was accepted. As a result, standards of human resources were average. The average standard of expenses and facilities was 3.36, SD was 0.89, t value was 4.84, and sig. value was lower than 0.05; therefore, the null hypothesis was rejected. As a result the standard of expenses and facilities was over average. Other variables are also observed in this Table.

Pearson Correlation Coefficient was utilized in order to examine the relationship between the nurses' knowledge of professional ethics in three domains (structure, process, and result).

As observed, correlation coefficient between nursing ethics knowledge and standards of nursing care in the domain of structure was 0.387 which is significant at an error level of 0.01. Correlation coefficient between nursing ethics knowledge and standards of nursing care in the domain of process was 0.361 which is significant at an error level of 0.01. And the correlation coefficient between nursing ethics knowledge and standards of nursing care in the domain of result was 0.146 which is not significant at an error level of 0.01. According to the results presented in the above Table 4, it can be concluded that with an improvement in nursing ethics, nursing standards

Table 3. The results of Pearson Correlation Coefficient to examine the relationship between the nurses' knowledge of professional ethics and health care standards

Variable	Nurses' Knowledge of Ethics		Result
	Pearson Correlation Coefficient	Sig.	
Structure	0.387	0.001	Significant
Process	0.361	0.001	Significant
Result	0.146	0.081	Not Significant

Table 4. Ranking the nursery knowledge using Friedman Test

Variable	Mean Rank	Priority
Clinical Specialty	3.58	1 st
Nurse as a Manager	2.22	3 rd
Nurse as an Instructor	2.85	2 nd
Nurse as a Researcher	1.35	4 th

will improve especially in the domains of structure and process. According to the results of analyzing the respondents' views, the first priority was related to "nurse in clinical specialty" and the last to "nurse as a researcher".

4. Discussion and Conclusion

The results of the present study indicated that there is a correlation between the rate of professional ethics knowledge and nursing standards in hospitals. Given the nurses' ethical learning and its relationship with their professional requirement in order to observe health care standards, it should be significantly noticed that nursing graduates need be provided with quality training on ethics during their internship so that they can acquire necessary skills and take responsibilities in the future. Training and improving human resources is a strategic measure which at individual level empowers the individuals and give them value, at organizational level it improves and extends the organization's performance and efficiency, and at national and international levels it enhances productivity and economic and social profits. Numerous similar studies that have been carried out in Iran and other countries investigated the relationship between professional ethics knowledge and observance of nursing standards. The results of the present study are in agreement with those of the study conducted by Kalaitzidis who indicated that there is a direct relationship between learning professional ethics knowledge and better performance of nurses regarding care standards¹⁷. According to him, a large number of nursing students believed that training ethics is one of the requirements for professional and care performance. Numminen also reported similar results, which confirm the results of the present study¹⁸. The results of the domestic studies also indicated the importance of this relationship. In a similar study, Dehghani et al. concluded that holding training courses of professional ethics and related conferences had an effective role in enhancing the observance of nursing professional standards and criteria, which confirms the results of the present study¹⁹. Professional ethics knowledge is so important that Hashemi and Parsyar stated changing the content of curriculum of professional ethics training is necessary to deal with the unfavorable performance of professional ethics among nursing students²⁰. In their study, Korkmaz and Erdil indicated the relationship between professional ethics knowledge and observance of nursing standards²¹. A deeper look into the issue reveals the direct relationship between professional ethics knowledge and observance of nursing standards. On the other hand, Borhani et al. concluded that training ethics is effective in enhancing nursing students' knowledge about ethical issues and practical use of them

in working environment, which confirmed the results of the present study. Therefore, understanding the level of acquired knowledge during academic periods and inservice programs increases the knowledge of the nurses about skills necessary for health care in hospitals, this is not only effective in ensuring mental security but it can also accelerate the patient's recovery process and bring about the nurses' job satisfaction. Therefore, appropriate changes that is compatible with necessary skills to ensure patient's security, such as changing syllabus, facilities, equipment, and theoretical and clinical educational environment, can enhance the ethics along with necessary skills in order to ensure the patients' security by nurses in hospitals. Moreover, in order to enhance the quality of service provision and observance of the utmost level of standards, serious steps need to be taken regarding enhancing the nurses' practical and ethical capacity, which should be taken into comprehensive consideration of authorities and current teaching methods and nursing facilities need to be reviewed and replaced with the latest scientific and experienced methods of other countries^{13,22-25}.

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