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Artículos

# Barriers standards of professional ethics in clinical care from the perspective of nurses

Estándares de barreras de la ética profesional en la atención clínica desde la perspectiva de las enfermeras

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#### ABSTRACT:

Introduction and Objectives: Promoting professional values is an important factor in the development of nursing careers, so that any mischief in honoring professional commitment and ethics can overcome the best nursing care. The view of most nurses is that there are barriers to the ethical functioning of their work environment, which disrupts their ability to provide proper and appropriate care. In view of the above, and considering that such a study was not carried out in Bam, this study aimed to determine barriers to observance of professional ethics standards in clinical care at Pasteur Hospital in Bam. Methods: This descriptive-analytic study was conducted with the participation of nurses of Pasteur Bam Hospital in a census sampling. A tool for collecting information is a questionnaire that examines the barriers to observing professional ethics standards in three dimensions: managerial, environmental and individual-care. Data were analyzed by SPSS software version 23 using descriptive statistics (frequency distribution, mean, standard deviation) and inferential statistics (independent t-test, ANOVA). The results show the relationship between the ethical and demographic variables there Mnadaramary. The mean barriers standards of professional ethics in clinical care from the perspective of nurses 56/0±81/3 that according to the maximum (5), barriers to standards of professional ethics in clinical care, which has average barriers in various fields as follows: environmental barriers with an average of 66/0±10/4, administrative barriers with an average of  $64/0\pm77/3$  and personal barriers with an average of  $65/0\pm75/3$ , respectively. Discussion: Given that environmental factors as the main obstacle in non-compliance with standards of professional ethics is, therefore, recommended that health centers-Treatment with careful planning and an emphasis on the principles and standards of care, including environmental factors, importance of professional ethics improvement in, the disadvantages of non-compliance with professional ethics, Providing favorable conditions for nurses such as improving the sector, creating an environment of physical and psychological comfort and safety and satisfy their needs such as rest and adequate income, develop shifts appropriate equipment standard, effective steps to comply with the best standards of professional ethics Take away.

KEYWORDS: professional ethics, clinical care, nurses.

#### RESUMEN:

Introducción y objetivos: Promover los valores profesionales es un factor importante en el desarrollo de las carreras de enfermería, por lo que cualquier travesura en el cumplimiento del compromiso y la ética profesional puede superar la mejor atención de enfermería. La opinión de la mayoría de las enfermeras es que existen barreras para el funcionamiento ético de su entorno de trabajo, lo que altera su capacidad para brindar una atención adecuada y apropiada. En vista de lo anterior, y considerando que dicho estudio no se llevó a cabo en Bam, este estudio tuvo como objetivo determinar las barreras para el cumplimiento de los estándares de ética profesional en la atención clínica en el Hospital Pasteur en Bam. Métodos: Este estudio descriptivo analítico se realizó con la participación de enfermeras del Hospital Pasteur Bam en una muestra del censo. Una herramienta para recopilar información es un cuestionario que examina las barreras para observar los estándares de ética profesional en tres dimensiones: gestión, medio ambiente y atención individual. Los datos se analizaron mediante el software SPSS versión 23 utilizando estadísticas descriptivas (distribución de frecuencia, media, desviación estándar) y estadísticas inferenciales (prueba t independiente, ANOVA). Los resultados muestran la relación entre las variables éticas y demográficas que existen en Mnadaramary. La media de las barreras estándares de ética profesional en la atención clínica desde la perspectiva de las enfermeras 56/0±81/3 que según el máximo (5), barreras a las normas de ética profesional en la atención clínica, que tiene barreras promedio en varios campos como sigue : barreras ambientales con un promedio de  $66/0\pm10/4$ , barreras administrativas con un promedio de  $64/0\pm77/3$  y barreras personales con un promedio de 65/0±75/3, respectivamente. Discusión: dado que los factores ambientales como el principal obstáculo en el incumplimiento de los estándares de ética profesional es, por lo tanto, recomendado que los centros de salud: tratamiento con una planificación cuidadosa y un énfasis en los principios y estándares de atención, incluidos los factores ambientales, la importancia de los profesionales mejora de la ética, desventajas del incumplimiento de la ética profesional, proporcionar condiciones favorables para las enfermeras, como mejorar el sector, crear un entorno de confort y seguridad física y psicológica y satisfacer sus necesidades, como descanso e ingresos adecuados, desarrollar turnos en el equipo adecuado Pasos estándar, efectivos para cumplir con los mejores estándares de ética profesional.

PALABRAS CLAVE: ética profesional, atención clínica, enfermeras.

### Introduction:

Approach the world today can be considered a return to rationality and ethics. After different periods of mankind is to have a rational approach and ethical needs. Therefore, we can focus ethics future global



developments, he said. This approach can affect strings that are leading in serving human beings <sup>1</sup>. Although ethics all jobs are necessary but, in the nursing profession, this factor is more necessary because of the spiritual coupled with responsibility nurses play an important role in the recovery and return peace to them, so the nursing profession on ethics rests <sup>2</sup>. Ethics integral part of human life under a set of practical philosophy and the principles and values that the individual and collective behaviors as right and wrong under the rule of the <sup>3,4</sup>. Ethics in nursing, is very important and directly with clinical care, quality and competence of nurses <sup>5</sup>. So that any mischief in honoring professional commitment and ethics can overcome the best nursing care and, conversely, it can play an important role in the professionalization of nursing <sup>6</sup>

So far in the field of ethics, nurses largely a function of medical specialties which are due to nursing ethics as an independent subject, less attention has been paid <sup>7</sup>, but the role and responsibilities of the nurse every day definitions of a broader found and Nursing as a profession known independent legal and medical communities <sup>8</sup>. Ethics in Nursing will work ethic of the patient and the health care; and thereby the person committed that his career not do so the patient does not harm the care process to improve patient to have <sup>9</sup>.

In this context, many studies have been done in the world and Iran. Studies have shown that the mean score of moral reasoning for nurses abroad is 51.45 and in Iran 16.42, ethical principles are not favorable in clinical decision making and nurses are not able to apply ethical knowledge in the real environment <sup>10</sup>. The results Torabizadeh et al (2012) suggest that privacy and to the dignity of patients is not well respected, as well as medical and nursing staff little awareness of the importance of privacy and dignity of patients and their understanding of the different concepts <sup>11</sup>. The results also mohajjelaghdam et al (1392) suggest that the patients 8/41% of nurses are at high levels, 8/51% on average, and 4/6% in the weak code of ethics for professional nursing Iran has acted <sup>12</sup>. A study by Ghobadi Far and colleagues (2013) showed that although most health care providers highly assessed their performance in professional ethics, their performance score was moderate <sup>13</sup>. The findings of the study Sadeghi et al (2011) suggest that doctors and nurses to the patient's wishes and demands of neglect and do not provide enough information and just the patients <sup>14</sup>.

The argument and colleagues (2011) Nursing students' perceptions of barriers to professional ethics examined the data and found that the factors underlying the curriculum including the shortage of teachers fluent in ethics, failure curriculum, the use of improper methods in education ethical issues, evaluation problems and lack of objective means for evaluating the abilities of students in the field of professional ethics, the relationship between the individual and environmental constraints are effective clinical practice <sup>15</sup>. Study Nouhi et al (2013) to determine the ethical lapses of nurses by nurses in nursing ethics codes of ethics show is not suitable and planning in this regard is necessary administrative measures <sup>16</sup>.

The study of Gourchani et al. (2012) shows that nursing ethics is less than patients' viewpoints, while nurses report the average. 47% of nurses as well as their ethical performance levels were adequate, while 38% of patients considered the optimum performance. The higher average nurses 'ethical observance is from nurses' point of view to worrying patients because it suggests that nurses feel that their current performance is favorable, while not seen by the recipients of the service. As a result, we can say nursing ethics in the study were unfavorable <sup>17</sup>. The study of Mohammadi et al. (2018) shows that the level of knowledge of nursing and midwifery students and staff members has been reported from the principles of professional ethics in terms of communication, legal and ethical issues <sup>18</sup>.

The study of Khodayari et al. (2012) assessed the level of ethical values in hospitals at a moderate level close to the weak <sup>19</sup>, but in the study of Ghobadi Farr et al (2012), Mohajl Aghdam et al. (2012), the observance of ethical standards by Nurses are reported moderately (12 and 13). It seems appropriate to the diversity of beliefs and cultures, perceptions, and practices that apply to ethical values in clinical care. According to the results of the above studies and other studies, in this case, the majority of agree with each other and their views of the barriers to practice ethical in their work there, their ability to provide appropriate care and decent



disrupted he does. In view of the above, and considering that such a study was not carried out in Bam, this study aimed to determine barriers to observance of professional ethics standards in clinical care at Pasteur Hospital in Bam.

#### Метнор:

This is a descriptive-cross-sectional study which aims to determine the barriers to observing professional ethics standards in nursing practice in 2018. The research environment of Pasteur Hospital affiliated to Bam University of Medical Sciences and the research community consisted of 205 nursing staff. Due to the small number of samples, sampling was done in this study by census method. Data were collected by questionnaire consists of two parts: the first part includes demographic information such as age, sex, marital status, level of education, experience, location of work, the status of employment nurses and the second part of the questionnaire barriers to compliance standards of professional ethics from the perspective of nurses in the study of peasant and colleagues 20 in three aspects: management, environmental and personal care are made. The questionnaire contains 33 questions of professional ethical barriers (14 questions related to management, five questions related to the environment, 14 questions related to personal care) services. Five-point Likert scale items to be answered. Select the option strongly agree (score 5) or agree (score 4) indicates that the item is considered an obstacle to ethical professional. Choosing the Absolutely Opposed Option (Score 1) and Opposition (Score 2) indicates that the item does not impede the observance of professional ethics standards from the perspective of nurses. I do not have the choice to comment. The lack of knowledge of the effect of the variable in question is inadequate to professional ethics. In order to evaluate the content validity of the questionnaire to the 10 professors and PhD students of Nursing University of Medical Sciences were arranged and conducted on the basis of necessary reforms. In order to determine the reliability and internal consistency, Cronbach's alpha coefficient of the questionnaire completed by 20 nurses from  $\alpha = 0/89$  is obtained <sup>20</sup>.

Researchers ethical considerations referred to the hospital in Bam and in research from the Department of Science and Technology of the University of Medical Sciences received Bam. After publishing the goals and benefits of this study, hospital authorities were allowed to consult. The questionnaire and consent form by the researcher and visitors at the right time again to be distributed.

# THE RESULTS:

Study as a cross-sectional study, the information of barriers to professional ethical nursing practice is provided. In this study of 184 patients, 152% (6/82) of women and 32% (4/17) were men. Among these patients, 35 (19%) were single and 149 (81%) were married. Minimum age of 23 and a maximum of 55 years studied, the average age of  $67/6\pm42/32$  years. The minimum working experience of the studied samples is 1 year and maximum 25 years, with an average working experience of  $8.34\pm5.88$  years. Based on statistical results, 171 (92.9%) had undergraduate degrees and 13 (7.1%) had master's degrees. Among the subjects, 177 (96.2%) nurses, 3 (1.6%) nurses and 4 (2.2%) supervisors were nurses. The results of the study showed that there was a significant relationship between observing ethical criteria with age (P=0.57), gender (P=0.75), educational level (P=0.57), position (P=0.93) and marital status (P=0.38). There is no significant statistical relationship. Table 1 shows the relationship between service sector and professional ethics, which did not show a significant relationship between the service area and ethical standards (P=0.07). In the statistical results of Table 2, employment status was not correlated with ethical standards (P=0.42). The results of the study indicate that the average barriers to observance of professional ethics standards in clinical care from nurses' point of view was  $3.81\pm0.56$ , which, considering the maximum average  $^5$ , has barriers to



observing professional ethics standards in clinical care. The average of these barriers in different domains were: environmental barriers with a mean of  $4.10 \pm 0.66$ , management barriers with a mean of  $3.77 \pm 0.64$ , and then individual barriers with an average of  $3.75 \pm 0.65$ .

TABLE 1 Comparison of ethical standards in the workplace

Employment type	Management barriers	Environmental barriers	Personal barriers	Barriers to Ethical Criteria
Emergency Depart	3/77 ± 0/56	$4/06 \pm 0/64$	3/51 ± 0/51	3/70 ± 0/53
Medical	$3/53 \pm 0/53$	$3/94 \pm 0/58$	$3/57 \pm 0/52$	$3/61 \pm 0/55$
Surgical	$3/82 \pm 0/68$	$4/27 \pm 0/71$	$4 \pm 0/70$	$3/97 \pm 0/61$
Pediatric	$3/92 \pm 0/58$	$4/36 \pm 0/67$	$3/82 \pm 0/78$	$3/94 \pm 0/65$
Psychiatry	$3/73 \pm 0/70$	$4/12 \pm 0/68$	$3/76 \pm 0/50$	$3/80 \pm 0/56$
ICU	$3/50 \pm 0/68$	$3/81 \pm 0/79$	$3/72 \pm 0/56$	$3/64 \pm 0/57$
CCU	3/96 ± 0/59	$4/1 \pm 0/65$	$3/84 \pm 0/72$	$3/93 \pm 0/60$
Dialysis	4/07	4/40	3/50	3/78
Operation room	4/08 ± 0/46	4/09 ± 0/53	4/04 ± 0/47	4/06 ± 0/40
Administrative	$3/64 \pm 0/83$	$3/91 \pm 0/68$	$3/65 \pm 0/47$	$3/68 \pm 0/56$
Neonatal	$4/03 \pm 0/43$	$4/61 \pm 0/38$	$4/04 \pm 0/57$	$4/12 \pm 0/41$
AVOVA	P = 0/11	P= 0/07	P= 0/05	P= 0/07

TABLE 2 Comparison of ethical standards by type of employment

Employment type	Management barriers	Environmental barriers	Personal barriers	Barriers to Ethical Criteria
bespoke	4/06 ± 0/44	3/84 ± 0/54	4/36 ± 0/46	4/1 ± 0/37
Corporate	3/66 ± 0/69	$3/70 \pm 0/60$	3/99 ± 0/71	$3/73 \pm 0/56$
Contractual	$3/67 \pm 0/61$	$3/75 \pm 0/60$	$4/3 \pm 0/68$	$3/76 \pm 0/53$
Official test	$3/76 \pm 0/68$	$3/78 \pm 0/69$	$4/14 \pm 0/62$	$3/83 \pm 0/60$
Official absolute	3/89 ± 0/58	3/86 ± 0/74	4/16 ± 0/79	3/92 ± 0/61
T independent	P=0/22	P=0/89	P=0/39	P=0/42

# **Discussion:**

In this study, the barriers to observance of professional ethics standards in three areas of management, environment and individual care were examined from nurses' point of view, which in all dimensions had barriers to observance of professional ethics standards. Which is similar to the study by Dehghani et al. (2012), Ghamari et al. (2014), which could be of interest to managers and health planners <sup>9, 20</sup>. The results of the present study indicate that the highest average of barriers to observing professional ethics standards was from nurses' perceptions regarding environmental domain (with a mean of  $4.10\pm0.66$ ), which was consistent with the results of peasant studies <sup>20</sup>, lunar <sup>9</sup> and inspirational <sup>10</sup>. Factors associated with this area are: lack of facilities and equipment in the sector, biological and physical changes during night shifts, work on different shifts, crowded sectors, expect the unexpected patients and their nursing staff <sup>6,10,20</sup>. Therefore, it is suggested that by regulating more regular job shifts, which allow nurses the opportunity to adapt biological time to work, it will help nurses to better observe care standards, including: better observance of professional ethics standards in nursing care practices.



According to the results of environmental factors, management factors (mean 64/0±77/3) the main obstacle in standards of professional ethics in clinical care from the perspective of nurses. Factors related to the field of management include: organizing inappropriate nurses, nurse shortage, heavy workload of nurses, shifts inappropriate and compact, crowded wards, non-use of standard and advanced medical equipment, lack of patient awareness of the duties of nurse, lack of incentive programs by managers, directors inappropriate treatment <sup>6</sup>,9,20-23.

Improper management of nursing staff is one of the factors that significantly reduces the quality of nursing care and nursing professionalism  $^6$ . Despite the fact that there is a shortage of nursing personnel in Iran and the world, but in all countries, the departure of nurses from this profession is high, which will lead to an exacerbation of the shortage of nurses  $^{24,25}$ . The shortage of nursing staff leads to an increase in factors associated with dissatisfaction and burnout, such as an increase in workload and unpleasant work shifts  $^{26}$ ; which, according to the results of the above studies, are barriers to observing professional and ethical standards in nurses.

The results peasant et al (2013) suggest that nurses am working towards nurses shifts, ethical performance better, while nurses with morning and evening (Dvshyft burst) compared to other shifts, less professional ethical standards were met. Therefore it is necessary to reduce the effects of fatigue caused by long working time, changes in nurses' shifts occur  $^{27,36}$ .

Thus, according to the results of the above studies observed that a major challenge is the shortage of personnel joined by medical personnel as a barrier in professional ethics is clinically known. Seems to be a shortage of personnel in health centers with careful planning and controlled solve. Also, by educating nurses about the principles and standards of care, they can familiarize themselves with the importance of observing professional ethics in improving the quality of patient care and the disadvantages of not adhering to professional ethics. Direct supervision of clinical interventions can also help to remove barriers.

Based on the results of this study, the next important obstacle to observing professional ethics standards in clinical care from the viewpoint of nurses after the management factors is individual factors (with a mean of  $3.75\pm0.65$ ). Factors such as lack of time  $^{23,34}$ , failure to meet basic needs such as income or adequate rest, and nurse inherent characteristics such as personality, values in this area are  $^{20,28}$ . Considering that solving basic staffing needs, such as income or rest, is an important factor in facilitating the observance of nursing professional ethics standards from nurses' perspective. Therefore, increasing income and reducing workload can lead to promotion of ethical standards of nurses  $^{29,33}$ . So be sure the proper planning in order to solve the problems nurses more effective action to be taken, because in this case, even if the nurse and wants, beacause expressed to abide by professional ethics, it can not be that it is appropriate standards Ensure professional ethics in care services.

The results of various studies indicate that there is no relationship between nursing ethics and age  $^{1,19,29,30,31}$ , which is consistent with the results of this study; but some other studies indicate that the age of compliance with ethical codes in nurses has decreased  $^{16,32}$ , which can be attributed to the severity of nursing work and physical fatigue resulting from the activity in the clinic. Therefore, it can be argued that several factors that are associated with age can explain the role of age in reducing or increasing. For example, if the number of night shifts and workload is planned for a person of higher age, the number of his errors is reduced or vice versa  $^{16}$ .

There are no significant correlations between the degree of observance of professional ethics and sex  $^{1,7,19,30}$ , which is consistent with the results of the present study, but the results of some other studies indicate that there is a significant relationship between gender and the application of ethics  $^{16,29,31}$ . As women have better moral performance than men. But it seems that due to the women's personality framework on emotional and communication issues, this group of staff is more committed to ethical issues in providing care and treatment.



There are no other demographic variables such as marital status, work experience, education level, employment status and service area, with respect to professional and ethical values, which is similar to the results of studies conducted in this area <sup>16,19,30,31,35</sup>.

# Conclusion:

Regarding environmental factors as the most important barrier to non-observance of professional ethics standards, it is suggested that health care centers with careful planning and emphasis on principles and standards of care, including environmental factors, the importance of observing professional ethics. In improving patients' conditions, disadvantages of professional ethics. Providing favorable conditions for nurses such as improving the conditions of the sectors, creating a comfortable and safe physical and psychological environment and meeting their needs, such as rest and income, developing appropriate shifts, providing standard equipment, an effective step to better observe professional ethics standards.

# **Study Limitations:**

One of the limitations of this study was the lack of time from the nursing staff to fill in the questionnaires. In this regard, the questionnaires were tried to be distributed mid-shift work. Other limitations can be mentioned in this study only in a teaching and medical center. It is suggested in future researches that studies be conducted with a wider statistical community for more reliable generalizations.

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