

ORIGINAL ARTICLE

# Knowledge on Legal and Ethical Aspect of Nursing among Nurses Working in Kirtipur Hospital

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## ABSTRACT

**Introduction:** Nurses frequently encounter a range of legal and ethical challenges while caring for individuals through critical life events such as birth, illness, recovery, suffering, and death. Legal guidelines help nurses act appropriately and professionally, while ethical principles govern standards of behavior and moral decision-making. This study aimed to evaluate the level of knowledge of nurses regarding the legal and ethical aspects of their profession.

**Methods:** A cross-sectional study was carried out involving 111 nurses at Kirtipur Hospital. Data collection commenced following ethical approval from the phect-NEPAL Institutional Review Committee. Probability Proportional to Size (PPS) sampling techniques was employed to select the nurses from each department within the hospital. Data were gathered using a semi-structured, self-administered questionnaire and descriptive and inferential statistics is utilized and data was analyzed using the Statistical Package for the Social Sciences (SPSS).

**Results:** The study findings reveal that nurses possessed an overall average level of knowledge regarding the legal and ethical aspects of nursing. Only 25 (22.5%), demonstrated a high level of knowledge, while 62 (55.9%), had a moderate level, only 24 (21.6%) showed a low level of knowledge. A significant association was observed between the nurses' level of knowledge and their years of experience as well as their respective areas of work.

**Conclusions:** This study identified that even though majority had average knowledge on legal aspects of patient care, only a small percentage had good knowledge on legal and ethical aspect. So based on this study, Kirtipur hospital should plan educational, and training programs about legal and ethical aspect of nursing.

**Keywords:** Code of ethics, ethical issues, legal issues, nurses' knowledge

## INTRODUCTION

Nurses frequently face legal and ethical challenges while caring for individuals across various life events, such as birth, illness, pain, and death. Legal standards guide nurses to perform actions that are safe and professionally appropriate, while ethics focus on moral judgment and behavior during patient care decisions.<sup>1,2</sup>

With the rapid advancement in healthcare, nurses must remain updated on both legal responsibilities and ethical obligations to ensure patient safety and uphold professional standards.<sup>3</sup> Ethics and law are rooted in societal values; ethics provide philosophical guidance on moral behavior, whereas laws are formal rules set by governing bodies.<sup>4</sup> The International Council

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of Nurses (ICN) established a code of ethics in 1953, outlining principles to guide nurses in clinical decision-making.<sup>1,5</sup> The Nepal Nursing Council Act, 2052 (1995) defines standards for ethical and legal nursing practice in Nepal.<sup>6</sup> This study aims to assess level of knowledge regarding legal and ethical aspects among a nurses working at Kirtipur Hospital.

## METHODS

A cross-sectional study was carried out among nurses employed at Kirtipur Hospital. Out of a total population of 155 nurses, 111 were selected from various departments using the Probability Proportional to Size (PPS) sampling technique. Ethical approval for the study was obtained from the Institutional Review Committee (IRC) of pfect-NEPAL. The study's objectives and purpose were clearly explained to the participants, and written informed consent was obtained.

A semi-structured, self-administered questionnaire was used to gather data. Questionnaire was developed in English, and the questions were simple and clear to ensure easy understanding and accurate responses. It consists of socio demographic information, knowledge regarding legal aspects and ethical aspects. The validity of the instrument was ensured through a literature review and consultation with research and subject experts. To test reliability, a pre-test was conducted with 10% of the sample among 11 nurses at Kathmandu Model Hospital.

Participants were assured of their rights, including voluntary participation and the option to withdraw at any time without consequences. No discriminatory language was used throughout the study. Data collection was conducted over a period from 27th March to 28th April 2024. All collected responses were reviewed for completeness and accuracy; any errors or inconsistencies were corrected. The data were then coded and analyzed using IBM SPSS software. Descriptive statistics were used to summarize socio-demographic information, and inferential statistics (Chi-square test) were applied to examine associations between knowledge of legal and ethical aspects and selected variables. Findings were presented in tabular format.

## RESULTS

**Table 1. Socio-demographic Characteristics of Respondents (n=111)**

Variables	Number (%)
<b>Age in years</b>	
<25	65 (58.6 %)
25-35	42 (37.8 %)
35-45	4 (3.6%)
<b>Level of education</b>	
PCL	76 (68.5%)
BN	35 (31.5 %)
<b>Working experience</b>	
<1 year	41 (36.9 %)
1-5 years	53 (47.7 %)
6-10 years	12 (10.8 %)
>10 years	5 (4.9 %)
<b>Working unit</b>	
Emergency, PACU, ICU, NICU (Critical Unit)	31 (27.9%)
Burn OT, OT, Post op	20 (18%)
Plastic Ward, New General Ward, Trauma ward, Gyane Ward, Pediatric Ward, SIMMONS (Different Wards)	51 (45.9%)
Dialysis, OPD, CSSD (Non- Critical Unit)	9 (8.1%)
<b>Designation</b>	
Staff Nurse	108 (97.3%)
Ward In-charge	3 (2.7%)

Most 65 (58.6%) are under 25 years, with 42 (37.8%) aged 25–35. The majority 76 (68.5%) hold a Proficiency Certificate Level (PCL), while 35 (31.5%) have a Bachelor's degree. Regarding work experience, 41 (36.9%) have less than 1 year, 53 (47.7%) have 1–5 years, and the rest 5 (4.9%) have over 5 years. Most respondents 108 (97.3%) work as Staff Nurses. By unit, 51(45.9%) work in general wards, 31(27.9%) in critical care, 20 (18%) in OT/ Post-op, and the remainder 9 (8.1%) in non-critical areas (Table 1).

**Table 2: Knowledge on Legal Aspect and Responsibilities (n=111)**

Description	Correct Response
<b>Meaning of legal aspects*</b>	
Code that regulates nurses conduct	93 (84.5%)
Enforceable applies to all nurses	32 (29.1%)
Requires a standard to be meet	43 (39.1%)
The sciences and jurisdiction in nursing	45 (40.9%)
<b>Types of legal issues*</b>	
Malpractice	96 (86.5%)
Negligence	92 (82.9%)
Tort	72 (64.9%)
Battery	66 (59.5%)
<b>Condition causing Malpractice*</b>	
Medication error	94 (85.5%)
Threatening patient while not cooperating to do desirable care	79 (71.8%)
Nurses restrain patient without consent	83 (75.5%)
Unnecessary exposing patient while assisting for examination	57 (51.8%)
<b>Common form of Negligence*</b>	
Failure to recognize dehydration and electrolyte imbalances	71 (64.0%)
Administering incorrect medication dosage to patient	96 (86.5%)
Inadequate communicate and supervision of critical patient	84 (75.7%)
Improper monitoring psychiatric patient who attempted suicide	82 (73.9%)
Improper monitoring and recording vital signs of hypertensive patient	75 (67.6%)
Failure to administer the correct oxygen level to hypoxic patient	78 (70.3%)
<b>Legal Responsibilities*</b>	
Safeguard for the nurses and patients	86 (77.5%)
Value Judgment	50 (45.0%)
Be responsible for his/her own act	74 (66.7%)

Be competent in your practice	76 (68.5%)
Well documentation of care provided	80 (72.1%)
<b>Legal implications in legal accusation*</b>	
Criminal Charges	53 (47.7%)
Jail time for permanently or temporary basis	45 (40.5%)
Cancellation of licensure on a temporary or permanent basis	100 (90.1%)
Heavy fines or penalties	52 (46.8%)
Job termination	82 (73.9%)

(\* ) = Multiple response questions

Regarding meaning of legal aspects majority 93 (84.5%) respondents view legal aspects as regulations governing nurses' conduct, while 32 (29.1%) see them as enforceable rules for all nurses. Malpractice 96 (86.5%) and negligence 92 (82.9%) are the most frequently identified as legal issues, followed by torts and battery.

Common causes of malpractice were well-recognized, with medication errors mention by 94 (85.5%) respondents, whereas unnecessary patient exposure during examination was identified by only 57 (51.8%) participants. Regarding negligence, administering incorrect medication dosages was the most frequently identified form 96 (86.5%), followed by failure to recognize dehydration and electrolyte imbalances 71 (64.0%). Battery was identified by 42 (37.8%) respondents. Concerning torts, slander was recognized by 79 (71.2%) and libel by 73 (65.8%) respondents.

Regarding nursing responsibilities, 86 (77.5%) emphasized protecting both themselves and their patients. Nearly all 108 (97.3%) correctly stated that patient information should remain confidential and only shared with authorized individuals. Concerning, legal consequences, 100 (90.1%) acknowledged the risk of license suspension or cancellation, and 103 (92.8%) agreed that maintaining a standard of care helps minimize legal risks (Table 2).

**Table 3: Knowledge on Legal and Regulatory Guidelines (n=111)**

Description	Correct Response
<b>Legal document that guides nurses*</b>	
ICN Code of ethics	45 (40.5%)
Nursing Code of ethics	40 (36.0%)
Organizational policy	9 (8.1%)
Patient inform consent	17 (15.3%)
<b>Scope of practice for nurses</b>	
The duties and responsibilities	86 (77.5%)
<b>Patient rights*</b>	
Right to considerate and respectful care	91(82.0%)
Right to inform on diagnosis, treatment and medicines	104 (93.7%)
Right to confidentiality	94 (84.7%)
Right to refuse to participate in human experimentation	73 (65.8%)
Right to expect prompt treatment in emergency	66 (59.5%)
<b>Nurses' rights*</b>	
Right to economic incentive	70 (63.1%)
Right to working favorable conditions	87 (78.4%)
Right to pursue activities leading to professional development	90 (81.1%)
Right to set standard for nursing practice	94 (84.7%)
Right to advocacy of client's welfare	70 (63.1%)
The state nursing board	49 (44.1%)
<b>Organization to formulate policy in Nepal</b>	
Nepal Nursing Council	54 (48.6%)
<b>Organization safeguard to nurses in Nepal</b>	
Nursing Association of Nepal	85 (76.6%)

(\*) = Multiple response questions

The ICN Code of Ethics is the most referenced document 45 (40.5%), followed by the national Nursing Code of Ethics 40 (36.0%). Only 17 (15.3%) correctly identified patient informed consent as a legal document. A large majority 105 (94.6%) correctly understood informed consent as a patient's right to

make treatment decisions after understanding the risks, benefits, and alternatives. Nearly all respondents 108 (97.3%) emphasized the importance of accurate documentation of assessments, interventions, and outcomes. Most 96 (86.5%) agreed that the cardex should be signed after medication administration. Regarding scope of practice, 86 (77.5%) understood it as knowing one's roles and responsibilities. Patient rights most commonly recognized by 104 (93.7%) respondents include the right to be informed about diagnosis, treatment, and medications, 94 (84.7%) confidentiality, 73 (65.8%) refusal to participate in human experimentation and right to emergency treatment is recognized by 66 (59.5%) of respondents.

Regarding, knowledge on Nurses' rights, most frequently recognized right included setting standards for practice 94 (84.7%), access to professional development 90 (81.1%), and the right to economic incentives and advocacy for patient welfare 70 (63.1%). Further, organizations involved in legal protections, 49 (44.1%) correctly identified the State Nursing Board as responsible for handling negligence cases. For policy development, 54 (48.6%) pointed to the Nepal Nursing Council. A majority 85 (76.6%) viewed the Nursing Association of Nepal as playing a key role in safeguarding nurses' legal rights (Table 3).

**Table 4: Knowledge on Ethical Aspect of Nursing (n=111)**

Description	Correct Response
<b>Meaning of ethics</b>	
Sets of moral values	82 (73.9%)
<b>Importance of ethics*</b>	
To save the client from harm	91 (82.0%)
To practice standard	90 (81.1%)
Protect herself from legal actions	86 (77.5%)
To ensure what is right	74 (66.7%)
Respect and support client's right	78 (70.3%)
<b>Condition that arises in ethical issues*</b>	
Confidentiality	81 (73%)
Euthanasia	67 (60.4%)
Death and death related issues	86 (77.5%)

Organ donation	66 (59.5%)
Artificial insemination	59 (53.2%)
Abortion	72 (64.9%)
<b>Importance of code of ethics*</b>	
Provides standard guidelines	95 (85.6%)
Prevent from misconduct	71 (64.0%)
Preserve client's rights	83 (74.8%)
Standardized in patient care	95 (85.6%)
ICN	110 (99.1%)
NNC	110 (99.1%)
<b>Fundamental principles of Nursing*</b>	
Autonomy	103 (92.8%)
No maleficence	91 (82.%)
Beneficence	93 (83.8%)
Justice	99 (89.2%)
Veracity	73 (65.8%)
Fidelity	68 (61.3%)

(\*) = Multiple response questions

Most 82 (73.9%) correctly defined ethics as a set of moral values. The primary importance of ethics identified was protecting clients from harm 91 (82%), followed by practicing standard ethics 90 (81.1%), ensuring what is right 74 (66.7%), and respecting clients' rights 78 (70.3%). Likewise, Common ethical issues include confidentiality 81 (73%), death-related situations 86 (77.5%), organ donation 66 (59.5%), and artificial insemination 59 (53.2%).

Regarding knowledge of the code of ethics. A majority 95 (85.6%) believe it provides standardized guidelines for care. Additionally, 83 (4.8%) sees it as a way to protect client rights, and 71 (64%) believe it helps prevent misconduct. Nearly all respondents 110 (99.1%) recognized both the International Council of Nurses (ICN) and the Nepal Nursing Council (NNC) as key providers of the code of ethics.

Further, key ethical principles. Autonomy was the most recognized 103(92.8%), followed by beneficence 93 (83.8%), non-maleficence 91 (82%), justice 99 (89.2%), veracity 73 (65.8%), and fidelity 68 (61.3%). To uphold autonomy, 98 (88.3%) supported clients' right to make decisions, and 67 (60.4%) supported freedom of choice. Non-maleficence was linked to avoiding harm 90 (81.1%), while beneficence focused on doing good 86 (77.5%). Justice was correctly identified by 73 (65.8%) as fair service distribution. Veracity (truth-telling) and fidelity (keeping promises) were acknowledged by 65 (58.6%) and 53 (47.7%), respectively (Table 4).

**Table 5: Level of knowledge on Legal and Ethical Aspects (n=111)**

Description	Number (%)
<b>Level of knowledge</b>	
Good Knowledge (75-100)	25 (22.5%)
Average Knowledge (50-75)	62 (55.9%)
Poor Knowledge (<50)	24 (21.6%)

**Table 6. Association between Working Experience and Working Area with Level of Knowledge (n=111)**

Demographic Characteristics	Level of Knowledge			Chi square (X <sup>2</sup> ) value	p-value
	Good Knowledge (n=25)	Average Knowledge (n=62)	Poor Knowledge (n=24)		
<b>Experience</b>					
<1 year	2	29	10	15.504	0.017
1 - 5 years	16	27	10		
5 - 10 years	6	4	2		
>10 years	1	2	2		
<b>Working Area</b>					
Critical Unit	10	11	10	15.400	0.017
OT & Post op	7	9	4		
Different wards	5	36	10		
Non- Critical Unit	3	6	0		

p- value <0.05 = statistically significant

Among 111 respondents few respondents 25 (22.5%) had good knowledge ranging from score (75-100), more than half of the respondents 62 (55.9%) had moderate knowledge ranging from score (50-75) and 24 (21.6%) had low knowledge ranging (<50%). Overall, the findings suggest that the nurses possess an average level of knowledge in this area (Table 5).

There is an association between level of knowledge with working experience and working area. Where the respondent with experience of 1-5 years had more knowledge as compare to low and high working experience. On the other hand, respondent working in critical unit had more knowledge as compare to other unit (Table 6)

## DISCUSSION

The study included 111 nurses, with the majority aged 20–25 years (58.6%), followed by 25–35 years (37.8%), and a few aged 35–45 (3.6%). Most had 2 months to 15 years of work experience. In comparison, a study in Brazil reported nurses aged 25–59 with up to 20 years of experience<sup>7</sup>. Similarly, Koirala et al. found that (70.8%) had completed PCL in Nursing, and (72.2%) were staff nurses. In this study, (68.5%) had completed PCL and 97.3% were staff nurses.<sup>8</sup>

Regarding legal issues, 96 (86.5%) identified malpractice, 92 (82.9%) negligence, and 66 (59.5%) battery. This aligns with Maharjan et al's findings. On ethics, 82 (73.9%) correctly answered its meaning, and most recognized ethical principles like beneficence and non-maleficence.<sup>9</sup>

Medical errors identified by 94 (85%) of the respondents as a major cause of malpractice, are widely documented as a leading source of disciplinary actions. Incorrect drug dosages and failure to monitor electrolyte imbalance identified as a common form of negligence, which is common response in this study and also cited in patient safety and legal risk<sup>10</sup> Regarding Legal responsibilities, 86 (77.5%) of the respondents emphasized protecting both themselves and patients. These findings align with the legal frameworks Code of ethics for Nurses given by American Nurses Association, which focuses on patient advocacy, accountability and professional integrity.<sup>11</sup>

Further, nurses' responsibilities regarding patient confidentiality correctly identified by 108 (97.3%) of the nurses. Which shows protection of patient information is reinforced by Health Insurance Profitability and Accountability Act and Professional ethical code globally. Likewise, 100 (90.1%) of the respondents answer license suspension and cancellation reflects awareness regarding regulatory consequences.<sup>11</sup> Further, the Nursing and Midwifery Council and the National Council of state boards of Nursing enforces accountability and adherence to professional standards to safeguard public safety.<sup>11,12</sup>

Further, The ICN code of ethics was the most frequently identified guiding document as followed by National Nursing Code. The findings similar with global literatures focusing on professional code of ethics provides the foundation for ethical framework for nursing practice.<sup>4</sup> Nepal nursing council legally mobilize this standard for the professional disciplinary purpose.<sup>6</sup>

Regarding nurses' rights, 90 (81.1%) respondents answer right to professional development, 94 (84.7%) answer standard setting and 87 (78.4%) answer favorable working conditions. The ICN focuses on nurses right to safe working environment, professional development. Further, Nursing Association of Nepal advocates for nurses' welfare, professional standards and legal support.<sup>13</sup>

The 54 (48.6%) respondents answer that Nepal Nursing Council is a primary policy making body to regulate nursing practice standards and licensure. Likewise, 85 (76.6%) respondents answer Nursing Association of Nepal safeguard nurses right along with advocacy for nurses and professional role.<sup>6,14</sup> Most 82 (73.9%) respondents correctly defined ethics as a set of moral values. According to ICN nursing ethics provides framework for moral judgement.<sup>5</sup>

Regarding ethical principles, autonomy most answered principles 103(92.3%), followed by justice 99(89.3%), beneficence 93(83.8%) and non-maleficence 91(82%). These four principles form the foundation of biomedical ethics.<sup>4</sup> Further Justice was correctly interpreted by 73(65.8%), where Veracity and fidelity were less frequently recognized by respondents as compared to

other principles. Veracity is essential for maintaining trust in nurse patient relationship and fidelity indicate professional commitment and responsibilities. These findings reveal nurses have strong understandings on ethical value and principle among nurses.<sup>4</sup>

The study revealed 25 (22.5%) had good knowledge, 62 (55.9%) moderate, and 24 (21.6%) low. Similar studies in India reported moderate to average knowledge among nurses.<sup>14</sup> Further, the finding contradict to another study conducted among nurses at a tertiary care hospital in rural India showed that the majority (78%) of the participants had inadequate knowledge regarding law and ethics in Nursing.<sup>15</sup>

There was a significant association between knowledge level and factors like experience and work area, consistent with Waghmare's findings. In this study nurses working in critical ward had more knowledge as compared to other units. In contrast, Nurses working in general wards have a good level of knowledge than those working in specialized wards which the study Conducted in the Tertiary Care Hospital of Eastern Nepal.<sup>16</sup>

In this study respondent with experience of 1-5 years had more knowledge as compare to low and high working experience. However, no significant link was found with age or education level, as supported by studies in Tertiary Care Teaching Hospital, Nepal.<sup>17</sup>

Overall, only a few respondents had good knowledge. The findings suggest satisfactory knowledge in core area of ethical and legal nursing practice particularly however gap remain regarding informed consent. Respondents shows Strong foundations on understanding on ethical values and principles. High recognition on professional codes and regulatory bodies that indicates awareness on institutional ethical governance. However, low understanding on veracity and fidelity indicates the need for strengthen ethics education and Inservice training focusing on relational and professional trust component. Incorporating legal and ethical education at the PCL level to enhance awareness among staff nurses is needed. This study provides baseline, institution-based evidence using Probability Proportion to Size sampling to ensure representative assessment of nurses' legal and ethical

knowledge. As a single center cross-sectional study cannot determine causality.

## CONCLUSION

Only few of the nurses have adequate knowledge about legal and ethical aspect of nursing. Nurses working in critical units had more knowledge as compared to other units. Therefore, regular update the knowledge through Inservice education, seminars, workshops, and conferences to enhance their knowledge in legal and ethical aspects of nursing.

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