

Knowledge and Awareness About Medical Negligence and Consumer Protection Act Among the Medical Practitioners in A Tertiary Care Hospital

Vedika Madhan,¹ Siddesh Revpla Channabasappa²

Abstract

Medical profession is considered as a most noble profession all over the world. In the recent past our medical profession has come under pressure due to globalization and liberalization. In view of the frequent amendments in the acts related to medical practice, it is pertinent that medical doctors should remain updated about the act and the implications thereof, to not only protect themselves from the medical negligence, but also for providing better medical care to the patients. Awareness about the act may alleviate these apprehensions and help in improving record keeping and patient doctor communications. Thus, a study was planned to benchmark the existing level of doctors' Knowledge and Awareness about Consumer Protection Act and Medical negligence.

In a prospective, cross sectional questionnaire-based study total of 100 doctors of the various clinical departments were included in the study. A self-administered, structured questionnaire consisting of 16 questions relating to Knowledge and Awareness about Consumer Protection Act (COPRA) and Medical negligence were asked through online google doc format. In the study, it was found that most of the participants (79%) were aware about the code of medical ethics, 93% doctors were aware that what makes a practitioner negligent. Among all participants, 91% doctors, felt that they have enough knowledge about COPRA & Medical Negligence. Majority of study participants (93%) are taking informed consent before any examination or procedure. A total 87% of doctors thought that consent and documentation prevent a charge of negligence. Among all participants only 41 doctors have medical indemnity insurance for themselves. A total 67% of participants felt that inclusion of medical practices in COPRA made the practice defensive. A large number of participants (95%) felt that doctors' services should be excluded from COPRA and 96% doctors are not in favour of Euthanasia. A highest number of participants (97%) felt that CME in relation to ethics, Medical Negligence and acts related medical practice in regular intervals.

Key Words: Medical profession; COPRA; medical negligence.

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Introduction:

Medical profession is considered as a noble profession all over the world. Its sole objective is improvement of the quality of

the life of the people and mitigation of sickness and suffering. The relationship between the doctor and patient is based on trust and confidence but these trust, sacredness and confidence, has become the talk of the olden days and now it sounds hollow. Now the doctor patient relationship has deteriorated considerably and medical negligence is on the increase which is the act or omission by a practitioner and thus the treatment provided is below the accepted level and causes injury to the

¹ Medical Student, ² Assistant Professor, Department of Forensic Medicine & Toxicology, Saveetha Medical College, Saveetha University, Thandalam Chennai (TN)

Correspondence: Dr Siddesh Revpla Channabasappa
Email: rsiddesh@gmail.com
Contact: 9474268729

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patient^{1,2}.

With commercialization spreading to all aspects of our lives, the medical profession and services rendered by hospitals and private clinics are going through dramatic changes. Some incidences cause suffering to the patients, forcing the legislature and the public to think twice about the credibility and authenticity of medical treatment given to the patients.³

Negligence may be defined as breach of duty caused by the omission to do something which a reasonable man, guided by those considerations which ordinarily regulate the conduct of human affairs would do, or doing something which a prudent reasonable man would not do, actionable negligence consists in the neglect of the use of ordinary care or observing ordinary care and skill toward a person to whom the defendant owes a duty of observing ordinary care and skill.⁴

There are three basic Constituents for Negligence; A legal duty to exercise due care on the part of the party complained of towards the party complaining the former's conduct within the scope of duty, Breach of the same duty, and Consequential damages. This very duty depends upon the foreseeability of the injury, that is caused due to the act of commission or omission, so he may foresee the injury to the plaintiff, liable owes a duty to prevent that injury and failure to that make him liable.^{4,5}

Statistics show that each year, in the United States, approximately 195,000 people die because of medical errors. As a result, it was increasingly felt that medical treatment should also be made answerable, hence doctors were covered by various laws like Consumer Protection Act (COPRA) and others.⁶

The service rendered to the patient by way of consultation, diagnosis and treatment both surgical and medical would fall in the ambit of 'service' as defined in the section 2[1] of the Consumer Protection Act.⁷

The law is not made to punish all health

professionals that cause injury to patients, it is concerned only with negligent acts. Doctors should be clear while taking the cases, they must decide whether to take the case, what treatment to give and they must take care in the administration of the treatment. A breach of any of these duties give the patient a right to act for negligence.¹

The medical profession has come under pressure due to globalization and liberalization. In view of the frequent amendments in the act, it is pertinent that medical doctors should remain updated about the act and the implications thereof, to not only protect themselves from the medical negligence, but also for providing better medical care to the patients.

Awareness about the act may alleviate these apprehensions and help in improving record keeping and patient doctor communications. Thus, a study was planned to benchmark the existing level of doctors' Knowledge and Awareness about Consumer Protection Act and Medical negligence.

Need for the study

The growing litigation against doctors is an issue of immediate concern. The reasons for these are socioeconomic, professional and judicial. Social factors include increasing public awareness about medical facts and fallacies, professional accountability, and rights of patients in terms of information, decision-making and assessing outcomes. Negative publicity in the media for the trivial issues about the profession doing further damage. Moreover, doctor-patient confrontations have been increasing in the recent past. Thus, a study was planned to benchmark the existing level of doctors' Knowledge and Awareness about Consumer Protection Act and Medical negligence.

Aims and Objectives:

- To assess attitude, knowledge about COPRA act among the medical practitioners in a tertiary care hospital.

- To assess attitude, knowledge about Medical Negligence among the medical practitioners in a tertiary care hospital.

Materials & Methods:

A Prospective, cross sectional questionnaire-based study was carried out months of February & March 2020 among medical practitioners at Saveetha Medical College hospital, Chennai. The doctors of the various departments were approached and total 100 medical practitioners were included in the study. Those who were on leave, refused to participate and those who were not accessed our google doc questionnaire were excluded from the study. Only practicing medical practitioners were included in the study. Willingness for participating in the survey is recorded before initiating the questionnaire in the google doc document. They were informed that this questionnaire is the part of study and they are free to accept or deny completing it. A self-administered, structured questionnaire written in English validated through a pretest was used to evaluate the knowledge of medical negligence & COPRA among participated professionals, a total number of 16 questions related to the Knowledge and Awareness about Consumer Protection Act (COPRA) and Medical negligence were asked through online google doc format. The questionnaire was pretested on a group of 12 medical practitioners, who were excluded from the study and questionnaire was modified accordingly. The questionnaire was asked through online google doc format. Total 138 questionnaires were distributed among medical practitioners of various specialties out of which 100 responses were recorded within stipulated time and taken for the study. An analysis was carried out for the questions by categorizing them into either the 'yes', 'no', 'To some extent'/'Depending on circumstances' 'can't say and 'don't know' answers. Received responses were tabulated and statistically

analyzed. Results were tabulated, analyzed using SPSS software version 16.0 with appropriate statistical tests.

Ethical consideration

Permission to conduct the study was obtained from the institution authority. Ethical Clearance was obtained from Institutional Ethics Committee, Saveetha Medical College, Chennai prior to the study. Informed consent was taken from each respondent. Confidentiality was maintained.

Results and Observations:

The current study consists a total of 100 medical practitioners' responses from various specialties. It was found that 79% of the participants were aware about the code of medical ethics, 15% of doctors were not aware and 6 were aware to some extent. Out of 100 medical practitioners, 93% doctors aware that what makes a practitioner negligent and 7% of doctors were aware to some extent. 48% of professionals were felt provisions under COPRA for medical practices are adequate, 26% of doctors felt it's not adequate and 6% felt 'No', 8% felt only to some extent & 12% of doctors don't know about it. 9% of doctors felt that they have enough knowledge about COPRA & Medical Negligence, 5% said no and 4% felt that they have knowledge to some extent.

A total of 86% of doctors are taking precautions to prevent charge of negligence, 6% of doctors said no, 5% of doctors said to some extent/ depending on the circumstances and 3% of doctors said don't know about that.

A total of 93% of study participants are taking required consent before any examination or procedure they consider that informed consent is best among all. A total 87% of doctors thought that consent and documentation prevent a charge of negligence and 5 % of participants felt it depending on the circumstances/to some

extent. When we asked 'Does COPRA forces the doctor to communicate better with the patients?', 72% of participants felt yes, it's a fact, 12% said No its not and 5% said to some extent. Among 100 participants only 41% of doctors had medical indemnity insurance for themselves. A total 67% of participants felt that inclusion of medical practices in COPRA made the practice defensive, 12%

of doctors said no for the same and 11% said to some extent. A total of 73% of medical practitioners felt that COPRA minimizes commercialization in practice and reduce malpractice, 71% of doctors felt that COPRA gives rise to an efficient patient care as the doctors are more conscious and careful in rendering the service. A large number of participants (96%) felt that COPRA hampers the doctor

Questionnaire Table:

Sl. No.	Questions	Yes	No	To some extent / Depending on circumstances	Can't Say	Don't know
1	Are you aware of MCI Code of Ethics, 2002	79	15	06	00	00
2	Are you aware that what makes a practitioner negligent	93	00	07	00	00
3	Do you feel provisions under COPRA for medical practice are adequate?	48	26	06	08	12
4	Do you feel you have enough knowledge about COPRA & Medical Negligence?	91	05	04	00	00
5	Are you taking precautions to prevent charge of negligence?	86	06	05	00	3
6	Are you taking Informed consent before any examination or procedure?	93	00	04	00	3
7	Do you think Informed consent and documentation can prevent a charge of negligence	87	06	05	02	00
8	Does COPRA force the doctors to communicate better with the patients?	72	12	05	05	06
9	Have you made medical indemnity insurance for yourself	41	59	00	00	00
10	Inclusion of medical practice in COPRA made the practice defensive	67	12	11	00	10
11	COPRA minimizes commercialization in practice and reduces malpractice	73	12	08	00	07
12	COPRA gives rise to efficient patient care as the doctors are more conscious and careful in rendering the service	71	12	08	00	09
13	COPRA hampers the doctors from giving their best out of fear of mishaps, unwanted litigation, huge compensation, etc.	96	00	04	00	00
14	Do you feel doctors' services should be excluded from COPRA?	95	00	00	02	03
15	Do you favour EUTHANASIA	02	96	02	00	00
16	Do you feel CME in relation to Ethics, Medical Negligence and acts related to medical practice shall be conducted in regular interval	97	00	03	00	00

from giving their best out of fear of mishaps, unwanted litigation, huge compensation etc. also, they felt that doctors' services should be excluded from COPRA and 96% of doctors are not in favour of Euthanasia. A highest number of participants (97%) felt that CME in relation to ethics, Medical Negligence and acts related medical practice in regular intervals.

Discussion:

The better knowledge about medical negligence and acts related to medical practice among the medical practitioners comes from the clinical exposure in hospital setting. This study has given further insight into the domains of medical law & ethics, consent, perceptions & apprehensions of the doctor about COPRA and to deliver better patient care and protect themselves.

This study was conducted among doctors to map their knowledge, awareness and perceptions about medical negligence and Consumer Protection Act. In the present study, majority of the doctors had considerable knowledge on Medical Negligence & COPRA act. most of the participants said that knowledge of MCI code of ethics is extremely important and only few of them said it is not important all, their main source of knowledge on healthcare ethics was during training, and such experiences should be used to reinforce ethical knowledge and practice. This is in accordance with the study done by Dash S.K. in 2010.⁸

In our study, 87 percent of participants felt that consent and documentation can prevent a charge of negligence & they had knowledge about record keeping as compared the other participants, this could be credited to their experience in the clinical field which is in consistent with the results recorded in a study done in 2009 by Makhani CS et al in Indore.⁹

In this study, most of the medical practitioners (87%) regarded Informed consent as valid and important and this is in

accordance with the study carried by Heywood R. in 2007 who found that 98% of participants found Informed consent to be important and necessary for a surgical intervention.¹⁰

In the current study, 41% of the doctors in our study were not had medical indemnity insurance, this is in accordance with the study carried out by Dash S.K in 2010, who recorded that only 35% of doctors had medical indemnity insurance.⁸

In the current study 67% of participants responded that inclusion of medical practice in COPRA made the practice defensive, similar observations were recorded in the various studies.^{5,8,10}

A large number of participants (96%) felt that COPRA hampers the doctor from giving their best out of fear of mishaps, unwanted litigation, huge compensation etc. also, they felt that doctors' services should be excluded from COPRA, similar observations recorded in study done by Dash S.K.⁸

In the current study, 96% of doctors do not favour Euthanasia, similar findings noted in the study done Dash S.K.⁸

Almost all participants felt that CME in relation to Ethics, Medical Negligence and acts related medical practice should be conducted in regular interval, our observations are in consistent with the observations recorded in studies done by.^{8,11}

The fundamental rights enshrined in the constitution say that patient has a right of access to health care. The healthcare worker should take reasonably practicable steps to maintain a safe environment for patients and staff in which patients can be offered treatment in accordance with the duty of care that is owed to them.¹³ If violence or aggression cannot be controlled so as to provide a safe working environment, the health service's duty to staff takes precedence over its duty of care of patients. The statutory duty of care is high and breach leads to a potential

malpractice case. Health care professionals and health services must work together to develop strategies to prevent and manage the risk of occupational violence.¹⁴

Conclusion:

This is the era of litigation against doctors, many of our doctors unfortunately get involved in a medical negligence case in their career due to lack of due care, lack of informed consent, negligent supervision. Lack of time to update their knowledge on law related medical practice probably the reason for this, which leads to deterioration of doctor patient relationships.

The Medical Ethics, acts related to medical practice should be emphasized in the MBBS under graduate so also in post graduate syllabus and examinations. There is always a continuum between practice and knowledge because a medical practitioner is a life-long learner. (IMG roles) Medical ethics teaching and training should help the doctors at any level whatever may be the discipline to assimilate and conceptualize the basic principles of ethical reasoning.

The study was a genuine endeavor to assess the knowledge of medical practitioners about Medical ethics, Negligence & COPRA act. The participants were knowledgeable about medical ethics and informed consent but when it came to record keeping and medical negligence their information was basic, they lacked knowledge about finer details. The curriculum for medical students needs to be more detailed in regard to medico-legal aspects. During residency, thorough literature review of malpractice cases should be considered compulsory and hospital cases with possible legal implications should be discussed. This will help the professionals to understand the medico-legal process and the ramifications attached to them. The limitation of our study is that it was conducted in one institute, even though the hospital consists of a diverse group of professionals coming

from different backgrounds, it cannot predict the overall situation in the country. Medical Colleges, hospitals and medical associations should increase their participation in holding seminars, CME's programmes on medical ethics and law related to medical practice should be made mandatory for all practitioners to increase awareness of medico-legal issues in medical practice.

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