

**Level of Awareness of Patients on Senate Bill No. 588  
(Magna Carta of Patients' Rights)**

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**Abstract** – This study sought to determine the level of awareness of patients on Senate Bill No. 588 (Magna Carta of Patients' Rights) and the common problems encountered by the patients Bayambang District Hospital and Sto. Nino Hospital, Bayambang, Pangasinan. A descriptive-survey method was used, with a validated questionnaire used to gather data. It determined the demographic profile of the respondents in terms of age, sex, educational attainment, and economic status. It also determine their choice of hospital classification. It was found out that respondents belonged to the age group 20-29 were mostly female, college graduates and earn a monthly income of Php 5,000 and mostly were confined in public hospitals. As to the level of awareness of the respondents regarding Senate Bill 588, findings showed that they are moderately aware of their rights with a WM of 4.28, while with the problems they have encountered during their stay in the hospital, they perceived it to be moderately serious as evidenced by the WM of 2.60-3.50. With the findings and conclusions, it was recommended that the DOH and health care professionals should work collaboratively to raise the level of awareness of patients and/or community folks on Senate Bill No. 588. (Magna Carta of Patients' Rights).

**Keywords** - Health, Humane treatment, Respect,

**INTRODUCTION**

The increasing cases of malpractices filed against professional health care providers based on lack of skills, foresight and diligence, misdiagnosis, wrong medications, wrong blood transfusion, adverse effects of anesthesia and medicine prescribed and administered, and refusal to provide health services and emergency medical treatment due to lack of money by patients, or resources of health care agencies. This has led to the creation of Senate Bill No. 588, entitled "Magna Carta of Patient's Rights" which aims to recognize and promote the patients' rights.

The need to protect and promote the dignity and integrity of all patients is now widely accepted. To this end, the World Health Organization (WHO) predicts that the articulation of patients' rights will make people more conscious of their rights and responsibilities when seeking and receiving health care treatments. This ensures that the patient and health care provider relationship is marked by mutual support and respect [1]. There are possible reasons why people are not aware of their basic rights as patients. Hence, Department of Health (DOH) in coordination with health care providers, professional and civic groups, media, health insurance corporations are extensively providing information and education campaign to inform people of their rights as patients as declared in the Bill of Rights [2].

This study would help patients recognize their rights to prevent exploitation and possibly be treated with care. This could also help lawmakers of the Senate Bill No. 588 (Magna Carta of Patients' Rights) evaluate the effectiveness of its dissemination and implementation. The study could also be a basis for other researchers to make a follow-up study and could help the health care team recognize and uphold patients' rights in order to deliver maximum care.

Furthermore, the (DOH) officials could be made aware on the extent of the dissemination of Patients' Bill of Rights, and likewise be able to enforce disciplinary action on health care providers proven guilty of violating Patients' Bill of Rights. At the same time, the study would help student nurses implement and recognize patients' rights, avoid exploitation of patients and help hospital administrators maintain the assurance of giving high quality care to patients.

**OBJECTIVES OF THE STUDY**

The study primarily determined the level of awareness of patients on Senate Bill No. 588 (Magna Carta of Patients' Rights), particularly the profile of the patients in terms of age, sex, educational attainment, and economic status. It also determined their choice of and hospital classification, the level of awareness of patients on Senate Bill No. 588 (Magna Carta of Patients' Rights) and the common problems

they encountered during their confinement in the hospital.

### **MATERIALS AND METHODS**

This study used the descriptive-survey method of research since the aim of his study is to determine the awareness of patients' rights on Senate Bill No. 588. It described the population in relation to specific variables. Descriptive research systematically, factually, and accurately describes an area of interest or situation. It also deals with comparison and contrast, or the discovery of existing relationships between events or groups [3].

### **Respondents**

Using the quota and convenient sampling techniques, the researchers selected eighty-six (86) patients who were confined in the two hospitals in Bayambang.

### **Data Gathering Procedure**

Before conducting the study, the researchers prepared a letter of request to the chief nurses of the two hospitals included in the study to permit them to conduct the study. The said letter was duly endorsed by the program dean of the Institute of Nursing. After seeking the approval of the chief nurses, the researchers sought the consent of the staff nurses in the different wards, namely: medical, surgical, and obstetrics. The questionnaire was administered personally by the researchers to the patient-respondents.

### **Treatment of Data**

To answer problem number 1 on the demographic profile of the patient-respondents, frequency counts and percentage were used. To answer problem numbers 2 and 3 which are on the level of awareness of the patient-respondents on Senate Bill No. 588 and the extent of seriousness of the problems they have encountered, respectively, weighted mean (WM) was used.

### **RESULTS AND DISCUSSION**

This deals on the presentation, analysis, and interpretation of significant data gathered on the demographic profile as well as their level of awareness on Senate Bill No. 588 and the common problems they encountered while undergoing treatment in the hospitals involved in the study.

**Table 1. Profile of the Respondents**

|                                  | <b>Frequency</b> | <b>Percent</b> |
|----------------------------------|------------------|----------------|
| <b>A. Age</b>                    |                  |                |
| 19 below                         | 19               | 22.1           |
| 20-29                            | 30               | 34.9           |
| 30-59                            | 27               | 31.5           |
| 60 years and over                | 10               | 12.9           |
| Total                            | 86               | 100            |
| <b>B. Sex</b>                    |                  |                |
| Male                             | 22               | 25.6           |
| Female                           | 64               | 74.4           |
| Total                            | 86               | 100            |
| <b>C. Educational Attainment</b> |                  |                |
| Elementary Undergraduate         | 1                | 1.2            |
| Elementary Graduate              | 3                | 3.5            |
| H.S. Undergraduate               | 10               | 11.6           |
| H.S. Graduate                    | 25               | 29.1           |
| College Undergraduate            | 12               | 14.0           |
| College Graduate                 | 33               | 38.4           |
| Master's Degree                  | 2                | 2.3            |
| Total                            | 86               | 100            |
| <b>D. Monthly Income</b>         |                  |                |
| Below Php 5,000                  | 38               | 44.2           |
| Php 5,001 - Php 10,000           | 19               | 22.1           |
| Php 10,001 - Php 15,000          | 8                | 9.3            |
| Php 15,001 - Php 20,000          | 9                | 10.5           |
| Php 20,001 - Php 25,000          | 3                | 3.5            |
| Php 25,001 - Php 30,000          | 3                | 3.5            |
| Php 30,000 - Php 35,000          | 3                | 3.5            |
| Php - 35,001 - Php 40,000        | 2                | 2.3            |
| Php 40,001 - Php 45,000          | 1                | 1.2            |
| Total                            | 86               | 100            |
| <b>E. Hospital Choice</b>        |                  |                |
| Public                           | 44               | 51.2           |
| Private                          | 42               | 48.8           |
| Total                            | 86               | 100            |

Table 1 shows that most of the respondents, 30 out of 86 or (34.9%) belong to the 20-29 age bracket. This is followed by 27 patients out of 86 (31.5%) which are within the age range 30-39, while 19 patients or 22.1% of the total respondents are 19 years old and below. Only 10 patients 12.9% of the respondents are 60 years and above. This goes to show that more than 50 percent of the patient-respondents are middle aged. According to Kohlberg's Development - moral difficulties motivated their development through a fixed sequence of increasingly flexible kinds of moral reasoning. Kohlberg demonstrated in his studies that people progressed in their moral reasoning (i.e., in their bases for ethical behavior) through a series of six stages. His observations and test on children and adults led Kohlberg to conclude that moral development follows

an orderly sequence in which human beings progress consecutively from one stage to the next in an invariant sequence, not skipping any stage or going back to any previous stage 4]. In relation to present study, the level of awareness of Patients on Bill of Rights may be affected by their age. If an individual is not aware enough of his/her rights that this may lead to violation of his moral life.

It would also be gleaned from the table that the number of the female respondents (64 females or 74.40%) outnumbered male respondents (22 males or 25.6%).

The table also revealed that most of the patient-respondents, 33 (38.4%) are college graduate, followed by patient respondents who are high school graduates. While 12 out of 26, came in third in the list. This goes to show that the respondents with higher educational attainment are aware that they have to undergo treatment in hospitals once they suffer from an illness that requires them to stay in hospitals. In the study of M. Filiz Ulusoy conducted in one of the state hospitals in Turkey in 1998, the awareness score were statistically and significantly different for educational level categories. A continuously declining trend was observed for patient rights awareness scores from the highest educational level to the lowest.

Also, it could be gleaned from the table that most of the respondents, (44.2%) have a monthly income of Php 5,000 below; followed by the number of patient-respondents, 19 out of 86 (22.1%), who indicated a monthly income within the range of Php 5,001-Php 10,000. Almost the same number of respondents indicated that they have a monthly income of Php 15,001-Php 20,000 (9 or 10.5%) and Php 10,002-Php 15,000 (8 or 9.3%). Eleven (11) out of 86 respondents (12.79%) earns an income ranging from Php 20,000-Php 45,000. This implies that more than one-half of the respondents belong to the low income families or within and below the poverty line. The finding on the respondents' economic status explains why there is a slightly higher number of respondents who are confined in public hospitals as revealed in the above table. As cited by M. Filiz Ulusoy (1998), the higher the socio-economic and cultural level of patients, the higher is the awareness of their rights, "a continuously declining trend was observed for patient rights awareness score from the highest educational level to the lowest."

Lastly, the table shows that as to the classification of the hospital where the respondents were confined, the number of patients in each type or classification of

hospital is almost the same, with 44 (51.2%) and 42 (48.8%) in public and private hospitals respectively.

Table 2. Level of Awareness of Patients on Senate Bill No. 588

| <b>Indications</b>   | <b>Mean</b>   | <b>Description</b>      |
|--|---------------|-------------------------|
| LA1 - Rights to medical care and humane treatment                      | 4.6512        | Very Much Aware         |
| LA4 - Right to information   | 4.6395        | Very Much Aware         |
| LA12 - Right to correspondence   | 4.6047        | Very Much Aware         |
| LA14 - Right to be informed of his rights and obligations as a patient | 4.5581        | Very Much Aware         |
| LA9 - Right to medical records   | 4.4070        | Moderately Aware        |
| LA13 - Right to express grievances                                     | 4.3953        | Moderately Aware        |
| LA3 - Right to privacy   | 4.2907        | Moderately Aware        |
| LA2 - Right to informed consent  | 4.2558        | Moderately Aware        |
| LA5 - Right of privileged communication                                | 4.2558        | Moderately Aware        |
| LA7 - Right to self-determination                                      | 4.2442        | Moderately Aware        |
| LA8 - Right to religious belief  | 4.1047        | Moderately Aware        |
| LA10 - Right to leave  | 3.9186        | Moderately Aware        |
| LA11 - Right to refuse participation in medical research               | 3.8953        | Moderately Aware        |
| LA6 - Right to choose physician  | 3.6860        | Moderately Aware        |
| <b>LA_ AVE</b>   | <b>4.2791</b> | <b>Moderately Aware</b> |

4.60-5.00 = VMA; 2.60-3.59 = MA

The above table shows that patients were very aware on their Right to Medical Care and Humane Treatment, Right to be Informed About Medical Treatment and Surgical Procedures, the Right to Correspondence and Receive Visitor and the Right to be Informed of their Rights and Obligations as a Patient.

The Right to Medical Care and Humane Treatment states that every person has a right to health and medical care corresponding to his state of health, without any discrimination and within the limits of the resources available for health and medical care at the relevant time.

Furthermore, Right to Information states that the

patient has the right to clear, complete, and accurate evaluation of the nature and extent of his disease, the contemplated medical treatment, and surgical procedure including the medicines to be administered and their generic counterparts and its probable outcome, economic costs, impact on lifestyle and work including side effects and after effects of the treatment, possible complications and other pertinent facts regarding his illness. However, if the disclosure of the information to the patient will cause mental suffering and further impair his/her health, or cause the patient not to submit to necessary medical treatment, such disclosure may be withheld or deferred to some figure, during an opportune time upon due consultation with the patients next of kin.

Likewise, the Right to Correspondence and Receive Visitor states that the patient has the right to communicate with relatives and other persons and to receive visitors subject to reasonable limits prescribed by the rules/regulations of the health care institution.

Finally, the Right to be Informed of His Rights and Obligations as a Patient states that every person has the right to be informed of his rights and obligations as a patient. The Department of Health, in coordination with health care providers, professional and civic groups, the media, health insurance corporations, people's organizations, local government units, and other government agencies and non-government organizations, shall launch and sustain nationwide information and education campaign to make people aware of their rights as patients, as declared in this Act.

Table 3. Common Problems Encountered by the Patients During Their Hospital Stay

| Problem  | Mean | Description        |
|--|------|--------------------|
| P2 - Nurses inject medicine without informing me its use and effects.  | 2.92 | Moderately Serious |
| P13 - Nurses won't listen to my grievances and queries   | 2.78 | Moderately Serious |
| P10 - I wanted to be discharged but they insisted to detain me because I have not settled my hospital bills despite the fact that I'm of my legal age and of sound mind. | 2.64 | Moderately Serious |
| P12 - My visitors were held up just before they enter my room.   | 2.63 | Moderately Serious |
| P3 - My private part was exposed during a catheterization procedure.   | 2.63 | Moderately Serious |

|  |      |                    |
|--|------|--------------------|
| P11 - They tried a new medicine on me without explaining what is it for and its effects. It turned out that I was already involved in an experiment before I can refuse. | 2.61 | Moderately Serious |
| P14 - I was not informed about my rights and obligations as a patient.   | 2.59 | Moderately Serious |
| P4 - They did not give clear explanation and complete information about my disease, treatment, treatment and medicines.  | 2.58 | Moderately Serious |
| P5 - I was not allowed to demand anything from my doctor specially about securing that all information and communication must be kept confidential.                      | 2.57 | Moderately Serious |
| P1 - Nurses talk to me rudely and even yell at me whenever they ask me to take my medication.  | 2.55 | Slightly Serious   |
| P9 - We asked for the medical record but personnel won't release it and seemed to intentionally delay it.  | 2.52 | Slightly Serious   |
| P7 - Nurses still inserted an IV line despite of my refusal and knowledge of the consequences.   | 2.50 | Slightly Serious   |
| P6 - They did not give me the right to choose physician even I'm in the private ward.  | 2.38 | Slightly Serious   |
| P8 - I am not informed about my right to religious belief like in the case of blood transfusion.   | 2.15 | Slightly Serious   |

|       |      |                           |
|-------|------|---------------------------|
| P_AVE | 2.57 | <b>Moderately Serious</b> |
|-------|------|---------------------------|

2.60 - 3.59= MS; 1.60 - 2.59 = SS

The over-all average weighted mean is 2.57 interpreted as Moderately Serious.

The table above also reveals that the common problems encountered which was rated moderately serious by the patients were P2, P13, P10, P3, P12, P11, P14, P4, and P5, according to their WM, respectively.

In the medical context, a patient's right means the moral ad inviolable power vested in him as a person to do, hold, or demand something as his own. By nature, every person enjoys a moral and inviolable power (i.e., right) to do, hold, enjoy, and exact those things proper

to one's whole being. Every right in one individual involves a corresponding duty in others to respect this

right and not to violate it." [7]

#### **CONCLUSION AND RECOMMENDATION**

Based from the findings of the study, the researchers arrived at the following conclusions, most of the respondents were in their early adulthood, one female dominated, college graduates earning Php 5,000 and below, and were confined in the public hospital. Furthermore, the respondents are moderately aware of the Senate Bill No. 588 known as the Magna Carta of Patients' Right. Lastly, the respondents perceived that the problems they have encountered during their stay in the hospital were moderately serious.

From the findings and conclusions arrived at in this study, the following are offered for consideration. One is the health care providers must be oriented on patients' rights stipulated in Senate Bill No. 588 to be able to render proper and equal care to patients. Also, nursing schools should include in their curriculum the discussion on the different rights of patients stipulated in Senate Bill No. 588 which will provide adequate information to students which can educate patients about their rights while confined in the hospital.

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