# Prioritizing Professional Values from the Viewpoint of Nurses of Shiraz University of Medical Sciences

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*Abstract: Background and aim: Nursing is an independent discipline and branch of the medical sciences whose mission is to provide the highest standard of health, care, medical and rehabilitation services and is the most important step in assessing the values of that organization. The aim of this study was to prioritize professional values from the perspective of nurses of Shiraz University of Medical Sciences.*

*Methods: This descriptive-analytical study was performed in the hospitals of Shiraz University of Medical Sciences. The study population was all nurses with at least 5 years of work experience. The sampling method was simple random. Two questionnaires were used to assess nurses' views on professional values. In the first part demographic information was reviewed and in the second part the revised questionnaire of nursing professional values was used.*

*Results : In this study 113 nurses of Medical Sciences University participated .According to the total averages in each dimension, it was found that for nurses, "trust" is the most important and "pragmatism" is the least important.*

*Conclusion: This evaluation provided useful information that could lead to more effective strategies and application of professional values in clinical practice.*

*Keywords: professional, values, nurses.*

## I. Introduction

Nursing is an independent discipline and one of the branches of medical sciences whose mission is to provide the health, care, and rehabilitation services at the highest standard level in order to provide, maintain, and promote community health. Taking steps to achieve this goal makes a nurse a professional person in the health department (1). In addition, one of the most important policies in the health sector is to improve the quality of health care services and implement the strategies as practice management and value management (2). These processes are followed based on integrating organization through programs such as formulating ethical statements (3). In

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formulating ethical statements, the most important step is to examine the values of the organization as the values of an organization reflecting the mission, goals and outlook of an organization. Hence, values are the primary ethical source. In other words, ethics is the implementation of the values (4). These values are standards of practice adopted by a care professional group which provide a framework for evaluating the values and beliefs that influence behavior (5). As organization is made up of individuals and professions, it can be stated that the values of the organization are divided into two categories: personal and professional ones. Individual values are desirable goals that differ in terms of their importance and act as guides in an individual's life and motivate behavior (6). Professional values are the values that are important in an individual's profession and job. Different careers have different professional values. For example, the values of the nursing profession are the values that are associated with the activities in the nursing profession such as altruism, equality, freedom, justice, and honesty (7). These values, influencing the attitude of individuals, are an important part of the nursing profession. The primary goal of the nursing profession is promoting the value of human beings and all those needing care (8). Many hospitals have focused on building a culture of patient care so that they can provide a safe environment for patients. In order to have a safe environment, the focus should be on reducing the errors. Hospitals do this by providing and expanding policies that act as a basis for providing services and reducing the errors (9). It is expected from nurses to use these policies that have been developed to create a safe environment. Professional values are the values that are crucial for hospital professionals. These values may attract people to their profession when they receive professional trainings or when they enter their job. For the nursing profession, professional values in the American Nursing Association are defined as codes of ethics. Codes of ethics are the same as ethical obligations and duties related to nursing profession in which nurses must not only perform them for the community but also for themselves (10). Therefore, professional values and professional ethics are closely related.
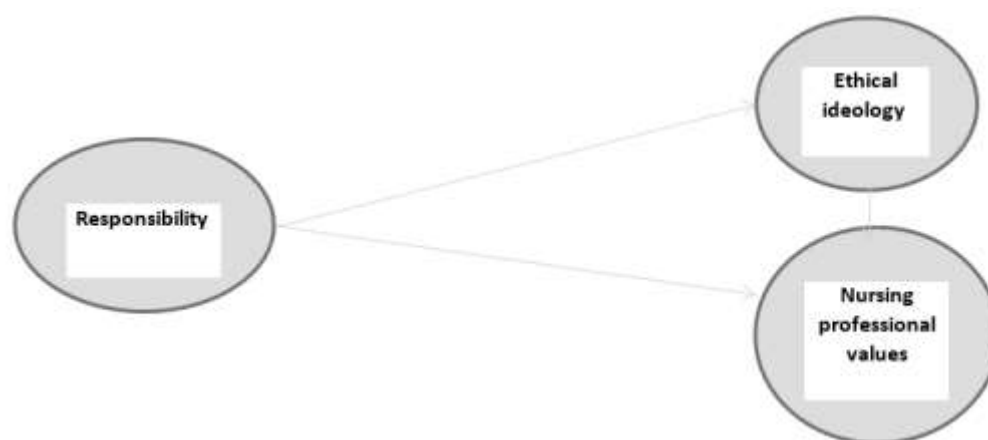
This conceptual model illustrates the influence of ethical thinking on professional values and responsibility as well as the influence of professional nursing values on responsibility. Florence Nightingale in the 19th century found that nursing not only includes scientific knowledge and technical skills, but also a profession that is defined and perceived by human values (11). Nurses and other caregivers require professional values to guide their professional behavior in order to overcome ethical problems. The development of professional values is a continuous and long-term issue beginning with nursing professional education that continues throughout the years of nursing practice (12). The studies conducted by Nurcan and Ozyazicioglu on nursing students showed that the scores of nursing students on professional value scale were at a good level. The results also showed that personal and environmental factors can influence nursing students' professional values. Nursing professional values are the most important component of providing high quality standards of care in the nursing profession (13).

Another study conducted on the professional values of Saudi nurses found that confidentiality, observing the privacy, ethical and legal rights as well as health and safety had the highest importance and participation in the activities of nursing associations and nursing research and research implementation, cooperation in public policies and participation in self-evaluation had the lowest importance (14). Ethical codes represent professional values and are closely related to each other (15). However, studies conducted in the field of ethics in Iran are more limited compared to other countries and as nurses are the largest caregivers in a health system and given its great impact on the quality of health care, the present study was conducted to evaluate the nurses' views on professional values in the dimensions of "care", "pragmatism", "trust", "professionalization" and "justice". This evaluation can provide useful information that can lead to providing more effective strategies and applying professional values in the clinic.

## II.    Methodology

This descriptive-analytical study was conducted in the hospitals of Shiraz University of Medical Sciences. The research population included all nurses who had at least 5 years of employment history and met the inclusion criteria. The research inclusion criteria included having at least 5 years of employment history and consent to participate in the study. The exclusion criteria of the research also included the history of completing the educational courses related to professional values and nursing ethics. Using multi-stage sampling method, a list of all teaching hospitals affiliated to Shiraz University of Medical Sciences was prepared. Then, Namazi and Hafez hospitals were selected randomly. The needed sample size was determined to be 113 people at the significant level of 5% using the sample size determination formula and according to the research conducted by Hosseini et al. ($\alpha$=0.05, $\varrho$=0.81, d=0.15) (16). Convenient and randomized sampling method was used in this research. Accordingly, the researcher extracted the list of all nurses working in each of the mentioned hospitals with their names in the existing nursing office. Using random number table and giving equal odds for each sample, the desired number of nurses was selected. In order to observe the research ethics in the data collection stage, a letter of introduction was first obtained from the Research Deputy of Shiraz University of Medical Sciences. Then, the researcher attended at the research environment and provided explanations on two demographic and professional values questionnaires. He ensured that the questionnaires would remain anonymous and the answers would remain confidential and participation in the research would be voluntary. He also provided information on the way of completing the questionnaire. Before completing the questionnaire by the nurses, their informed consent to

participate in the study was taken. A two-section questionnaire was used to evaluate nurses' views on professional values. In the first section, demographic information was examined, and in the second section, the Nursing Professional Values Questionnaire was used. It consisted of 26 items derived from the American Nursing Association Professional Ethics Code that included the dimensions of care (9 items), pragmatism (5 items), trust (5 items), professionalization (4 items) and justice (3 items) (17).

Options were scored on a five-point Likert scale. Accordingly, the option "not important" received score 1, the option "less important" receivedthe score 2, the option "relatively important" received the score 3, the option "important" received score 4 and the option "very important" received the score 5. The range of scores in this questionnaire was from 26 to 130, in which the higher scores indicated that nurses had high level of knowledge on professional values. This questionnaire was designed and standardized by Shank and Weiss to measure professional values and had validity and reliability (17). Its validity and reliability in Iran have also been confirmed by Hosseini et al (16). The data were analyzed after collecting and coding in SPPS, version 15, software. Descriptive statistics (mean and standard deviation and frequency) were used to assess nurses' views on professional values in the dimensions of care, pragmatism, trust, professionalization, and justice. Data were analyzed at the significant level of $P < 0.05$.

## III. Results

In this study, 113 nurses of university of medical sciences participated that 88.70% of them were female and 11.30% were male. Their mean age was 32.30 ±2.60 years, 65.40% were single and 34.6% were married. 98.30% of them had a bachelor degree and 1.7% of them had a master degree. 46.60% of them had official and 53.40% had contractual type of employment. Their employment history was 7.3 ±3.5 years. 98% of them had circular work shift and 2% had fixed work shift. In terms of family economy status, 38% selected the option of "income less than expenditure", 38% selected the option of "income equal to expenditure" and 13% selected the option of "income more than expenditure". In terms of ethnicity, about 76% of them were Fars and 15% were Lor and 9% were Turk. The main aim of this study was to evaluate the viewpoint of nurses on professional values in the dimensions of "care", "pragmatism", "trust", "professionalization" and "justice". In this study, in the "care" dimension, out of the 9 related questions, nurses rated "keeping patient confidentiality" and "dealing with staffs with improper practice" components as most important and "practice as patient supporter" and "observing participants in research work" as the least important components. The mean score in the keeping patient confidentiality component was 4.17 ±0.68 and the mean score of dealing with staffs with improper practice was 3.83 ±0.92 and the mean score in the component of practice as patient supporter was 2.98±0.83 and observing participants' rights score was 3.02 ±1.1.

The mean score on the 5-point Likert scale was 3.42 ±0.72 (Table 1).

**Table 1.** Mean and standard deviation of the components of "care" dimension in nurses

| Components of care dimension | Mean and SD |
|---|---|
| Keeping patient confidentiality | 68.17 ± 0.4 |

| | |
|---|---|
| Dealing with staffs with improper practice | 92.83 ± 0.3 |
| observing patient's moral and legal rights | 52.61 ± 0.3 |
| Protecting patients' privacy as part of their rights | 03.42 ± 1.3 |
| Lack of participation in care that is in conflict with my professional values | 81.36 ± 0.3 |
| Unbiased care for patients with different lifestyles | 44.31 ± 0.3 |
| Observing the principles of honesty and respect for the person as a guide for practice | 17.11 ± 0.3 |
| Observing participants' rights in research work | 10.02 ± 1.3 |
| Practice as patient supporter | 83.98 ± .2 |
| Care dimension      total mean =3.42 | SD= 0.72 |

As seen in Table 2, in the present study, out of five components of "pragmatism", the component of "promotion of profession through active participation in health related issues" had the highest importance and "participation in professional nursing association activities" had the lowest importance. The mean score in the component of "promotion of profession through active participation in health related issues was $3.51 \pm 1.4$ and the mean score in the component of participation in professional nursing association activities was $3.01 \pm 0.8$. The mean score on the five-point Likert scale was $3.28 \pm 0.91$ (Table 2).

**Table 2.** Mean and SD of components of "pragmatism" dimension in nurses

| Components of "pragmatism" dimension | Mean and SD |
|---|---|
| Promotion of the profession through active participation in health related issues | 4.51±1.3 |
| participation in nursing research or applying appropriate research results in clinic | 78.48±0.3 |
| Participation in decisions that affect the distribution of resources | 57.27±0.3 |
| Considering the role of professional nursing associations in developing health care policies | 02.13±1.3 |
| Participating in professional nursing association | 8.01±0.3 |
| Pragmatism dimension    total mean 3.28 | total SD 0.91 |

Table 3 shows the dimension of "trust" consisting of 5 components. The component of "responsibility and accountability for your own practice" was the most important component from the viewpoint of nurses and the component of "seeking counseling or cooperation if unable to meet patient needs" was the least important component from the viewpoint of nurses so that the mean of component of responsibility and accountability was reported as $3.98 \pm 1.02$ and the mean of component of seeking counseling or cooperation if unable to meet patient needs was $3.24 \pm 0.86$. The mean total score on the five-point Likert scale in this dimension was $3.60 \pm 0.81$ (Table 3).

**Table 3.** Mean and SD of components of "trust" dimension in nurses

| Components of "trust" dimension | Mean and SD |
|---|---|
| م | 02.98±1.3 |
| Responsibility and accountability for your practice | 34.82±0.3 |
| Maintaining competence in the clinical setting | 73.56±0.3 |
| effort to gain more education in order to update knowledge and skills | 13.41±1.3 |
| Participation in continuous self-evaluation | 86.24±0.3 |
| Seeking counseling or cooperation if unable to meet the patient needs | |
| Trust dimension              mean 3.60              total SD=0.81 | |

The "professionalization" dimension in this study consisted of four components. The component of "Establishing standards as guideline for practice" with a mean score of 3.84 ±0.88 was found as the most important component and "Participation in monitoring coworkers practice" component with a mean score of 2.93 ±0.10 was found as the least important component.

The total mean scores on the Likert five-point scale was 3.37 ±0.61 in the "professionalization" dimension (Table 4).

**Table 4.** Mean and standard deviation of the components of "professionalization" dimension in nurses

| Components of "professionalization" dimension | Mean and SD |
|---|---|
| Establishing standards as guideline for practice | 88.84±0.3 |
| Establishing activities to improve the clinical setting | 32.51±0.3 |
| Maintaining and promoting standards in students' learning program | 17.22±1.3 |
| Participation in monitoring coworkers practice | 10.93±0.2 |
| professionalization dimension              total mean 3.37              total SD= 0.61 | |

Out of three components related to "justice", "improving the level of access to nursing and health care equally for public" with a mean score of 3.66 ±0.85 was recognized as the most important component and "responsibility for meeting patients' needs considering the cultural differences" with the mean score of 3.34 ±1.02 was recognized as the least important component. The mean of total scores on the five-point Likert scale was 3.50 ±0.70. (Table 5).

**Table 5.** The mean of total scores on the five-point Likert scale

| Components of justice dimension | Mean and SD |
|---|---|
| Improving the level of access to nursing and health care equally for the public | 85.66±0.3 |

| | |
|---|---|
| protecting public health and safety | 25.51±0.3 |
| Responsibility to meet the patients' needs considering the cultural differences | 02.34±1.3 |
| Justice dimension          total mean =3.50 | total SD=0.70 |

The mean total score of nurses on professional values in this study was 89.23 ±19.74. This score indicated that the view of most of nurses with regard to the components of professional values ranged from "relatively important" to "important" on the five-point Likert scale. Based on the total means in each dimension, it was found that "trust" dimension was the most important and "pragmatism" was the least important dimension from the viewpoint of nurses.

## IV.    Discussion

Identifying the core values accepted by individuals and professions is a way of formulating ethical and value statements in service and healthcare organizations, since the values develop the individual behavior and create environmental norms (18). In this study, a number of components of professional values in nurses were investigated. The results showed that the "trust" dimension was the most important component from the viewpoint of nurses. The components of this dimension have more technical-professional aspects such as responsibility and accountability, maintaining competence in clinical setting andattempt to update the knowledge. From the point of view of these nurses, pragmatic dimension that included behaviors such as participation in health related issues, participation in research, and participation in decision-making, participation in activities of associations was considered as the least important dimension.

Patient care based on professional behavior is at the core of nurses' ethical codes and the nurses are expected to provide care for patients with respect and without bias (19). In the present study, the cases that obtained the highest score based on the viewpoint of nurses included responsibility and accountability for practice and maintaining competence in clinical setting, respectively. In a research conducted by Weis, it was shown that from the viewpoint of the students, the most important component in nurses' professional values scale was maintaining competence in the clinical setting, which was ranked second in the present study. It might be due to the increased sense of responsibility of nurses towards patients after starting clinical practice toward students. In addition, in a study conducted by Dehghani et al, it was found that responsibility and accountability for practice was the most important component among nurses (17).

With regard to the justice dimension, the component of "improving level of access to nursing and health care equally for the public" was the most important component based on the viewpoint of nurses and the component of "protecting public health and safety" was ranked second. However, in the study conducted by Hayes, "protecting public health and safety" was the most important component of the justice dimension for students (20). However, in the research conducted by Clark et al, the component of "protecting the public health and safety" was among the components with the highest importance among the students (21). With regard to the "care" dimension, the most important components in this study included "protecting the patient confidentiality "and "dealing with staffs with improper practice". However, in the study conducted by Alfred et al. to compare the professional values of

Taiwanese and American nursing students, Taiwanese students stated that the components of " protecting the patient confidentiality", "protecting patient privacy", and "observing the principles of honesty and self-respect as a guide to practice" were the most important components. However, American students considered "practice as a patient supporter", " protecting patient confidentiality "and "protecting the patient's moral and legal rights" as the most important components (22). In this regard, the cultural differences may justify the differences in results. The most important component in the dimension of "professionalization" among nurses was "establishing standards as a guide for practice" and the least important component was "participation in monitoring coworkers practice". In the study conducted by Hosseini et al, the least important component was "participation in monitoring coworkers practice" among students. In other studies, this component has also been reported as one of the least important components in the "professionalization" dimension, which was line with the present study (16). In a research conducted by Dehghani et al, 73 nurses (53%) reported that if they observed unethical practice in providing care for patient by their coworkers, they would sometimes react and report it (23). One of the most important ethical aspects that nurses must adhere to it, is their sense of responsibility for their coworkers' mistakes in patient care. The International Council of Nurses stated that patient safety is essential to improve the quality of nursing care and the primary responsibility of nurses is maintaining and protecting patient safety in all aspects of care, including informing the patient and coworkers about the risk reduction methods, supporting patient and reporting incorrect events to other staff to a responsible person (24). In the present study as well as other studies, the pragmatism dimension is the least important dimension among students or nurses (16, 25). Regarding the dimension of pragmatism, the most important component for nurses was "promoting the profession through active participation in health related issues" and the least important component was "participating in professional nursing associations' activities". It might be due to the reason that nurses show lower tendency to do activities beyond the limit of activities defined for them and they consider those activities important that are directly related to their profession (25). It means that nurses show lower tendency to do what they have to do outside of work time. In the present study, with regard to the perspective of nurses' professional values, the mean total score of nurses was in the range of important to relatively important, which was consistent with studies conducted by other researchers (16, 26).

## V.    Conclusion

The results of the study revealed that nurses participating in this study gave more importance for areas of "trust" and "justice" in the measurement of professional values and they gave the least importance for the area of "pragmatism". This made nurses unable to meet all patients' needs, thus it is necessary that hospital officials emphasize on ethical issues and build a spirit of comprehensive promotion of the professional values in nurses and provide high-quality work in the care and promotion of professional ethics. In addition, they should make an effort to establish and strengthen consulting services and develop appropriate training programs and methods. Officials should also support nurses and encourage them to participate in professional associations and research activities to promote the professional value of nurses.

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