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A Preliminary Study of the Emergency Nurses' Experience and Perception of Mediation in Settling Malpractice Claims Related to Advanced Emergency Nursing

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Introduction

Despite the increased pressures placed on public health systems due to, inter alia, the aging population this can never be cited as an excuse for medical negligence and malpractice. Specifically with regard to Emergency Nurse Practitioners (ENPs), the widened scope of their practice now requires them to take down patient histories, perform physical examinations, request further tests, formulate treatment plans, and to make referrals to other health care practitioners and teams. There is therefore also an increased risk for ENPs of being sued for negligence and medical malpractice. Worse still, the legal training offered in both elementary and advanced nursing programmes is scanty. Therefore, there is an urgent need to address the risky situation and explore possible alternative measures of dispute resolution.

Objectives

The main purpose of the current project is to study nurses' experience and perception of mediation in settling malpractice claims related to Advanced Emergency Nursing.

Methodology

This study has a non-experimental research design. First, a thorough literature review was conducted to gather background information on litigation and mediation in healthcare disputes. A cross-sectional, self-administered survey, which aimed to understand the current practice of mediation and emergency nurses' perception thereof, was conducted. The design of this questionnaire was inspired by a mediation-screening tool developed by the CPR International Institute for Conflict Prevention and Resolution. This tool was designed to assist disputants in their decision about whether to pursue mediation to resolve civil disputes.

Result

52% of participants reported a 'moderate to high' level of legal risk. There was no difference in perceived legal risk between ENP and non-ENP groups. Most

emergency nurses were aware of the important attributes of mediation as an alternative to dispute resolution. They also believed that mediation was a suitable means to settle healthcare dispute, albeit it is not a common practice within the Hospital Authority. However, it was found that only 44% of participants were willing to take part in mediation. Nevertheless, there may be a potential relationship between 'the willingness to participate mediation' and 'a formal mediation training' (OR=2.87, p=0.106). Despite the promotion of mediation in settling disputes, the development of healthcare mediation is still in its infancy. It is clear that more effort is required to clarify misconceptions and uncertainties around mediation before it can develop further in the context of healthcare.