

## Awareness on Consumer Protection Act-1986 (COPRA) among medical professionals of a medical college from Telangana State

G. Anjaneyulu<sup>1</sup>, M. Vijay Kumar<sup>2,\*</sup>, Karnapu Naga Ramya<sup>3</sup>, G. Nandini<sup>4</sup>

<sup>1</sup>Professor, <sup>2</sup>Assistant Professor, <sup>3,4</sup>UG Student, Dept. of Community Medicine, Bhaskar Medical College, Yenkapally, Telangana

**\*Corresponding Author:**

Email: vijaykmbbs@gmail.com

### Abstract

**Introduction:** Medicine is a noble profession where the relationship between the doctor and patient is based on trust and confidence but, nowadays there is growing anxiety and fear in both the medical profession and the community, resulting in an increasing trend of complaints and lawsuits against doctors and also increased incidences of public violence on doctors in our country.

**Materials and Method:** An institutional based cross sectional study was conducted among 90 professionals of whom 30 belong to interns, 30 post graduates (PG's) and 30 are faculty. A self administered close ended questionnaires proforma, having 28 questions related to the various aspects of consumer protection act 1986 having options in YES or NO type form was used.

**Results:** Majority of them (81.1%) have heard about COPRA act. Mean awareness score regarding consumer protection act (COPRA) among the total study population was 15.844±3.04. Among the total 90 respondents, 10 % (n=9) had experienced a situation where negligence has resulted in damage to patient. About one third (n=31) have heard about indemnity insurance and among them 32% (n=10) have insured themselves.

**Conclusion:** The awareness and knowledge level among the doctors in the present study was found to be very low, though the enactment of the COPRA Act 1986 was three decades old. Hence it is suggested to organize intensive regular CME's and orientation programs to improve the knowledge. This actually will help in long term the medical fraternity to develop and sustain confidence and mutual trust with the clients and thus create a healthy medical practice.

**Keywords:** Consumer Protection Act-1986 (COPRA), Negligence, Awareness, Institutional based, Indemnity insurance

### Introduction

Medicine is a noble profession where the relationship between the doctor and patient is based on trust and confidence but, nowadays there is growing anxiety and fear in both the medical profession and the community, resulting in an increasing trend of complaints and lawsuits against doctors and also increased incidences of public violence on doctors in our country.

Before enactment of the Consumer Protection Act-1986 (COPRA), all the disputes related to negligence of doctors or hospitals were filed under the relevant sections of Indian Penal Code to claim the damages or to get negligent punished. The remedies sought were time consuming and expensive. In 1986, COPRA act was enacted for better protection of the interest of consumer grievances, but till 1995, even the courts were not clear whether doctors are covered under COPRA or not. On 13<sup>th</sup> November 1995, the Supreme Court decision in Indian Medical Association, medical profession has been brought under the section 2(1)(0) of Consumer Protection Act 1986 which empowers the patient to file lawsuits (in case of perceived negligence) in Consumer Courts.<sup>(1)</sup>

The medical profession has also been included within the ambit of a 'service' as defined in the Consumer Protection Act; 1986. "Service" is defined the relationship between patients and medical professionals as contractual and not a master servant relationship as argued by the medical professionals.

The intention of the law is not to punish all health professionals that cause injury to patients; but is concerned only those with negligent acts either by omission or by commission. The Supreme Court also believes that a simple lack of care, an error of judgement, or an accident is not a proof of negligence on part of health professionals.<sup>(2)</sup> So as long as a doctor follows a practice acceptable to the profession of that day in the region, he/she cannot be held liable for negligence merely because a better alternative course/treatment was also available. When it comes to failure of taking precautions, what has to be seen is whether those precautions were not taken which the ordinary experience of professionals has found to be sufficient, is held for liability of negligence.<sup>(3)</sup>

Consumer awareness is emerging in the country, concepts are changing, laws are getting updated and consumers are getting more and more demanding. Hence, it is the time to think well and set our priorities rights both individually and collectively. Studies on knowledge about negligence or legal issues are rarely been reported in literature, hence the present study was undertaken to assess awareness of COPRA Act among medical professionals.

### Material and Method

The present study was undertaken to assess the awareness of consumer protection act among the Interns, Post Graduates (PG's) and faculty working in

Bhaskar Medical College and Bhaskar General Hospital, Yenkapally, Rangareddy District, Telangana.

**Study design:** An institutional based cross sectional study

**Study population:** A total of 90 professionals were surveyed of whom 30 belong to interns, 30 post graduates (PG's) and 30 are faculty. The selection of the participants was done using convenient sampling technique.

**Inclusion criteria:** Those who were working as interns, doing post-graduation and working as faculty and are willing to participate in the study were included.

**Study tools:** A self administered close ended questionnaires proforma, having 28 questions related to the various aspects of consumer protection act 1986 having options in YES or NO type form was used. It was pre tested and necessary changes were made accordingly.

The questions were based on the awareness of provisions of COPRA as applied to medical and dental profession, the time period for the patient to sue the concerned doctor, in case of frivolous complaint, the time of appeal against the orders of the district form, telephone number service to file a complaint, about indemnity insurance, and the necessity to know about news of alleged negligent cases and their results, and also about the necessity of preventive measures to avoid negligence.

### Materials and Method

The medical professionals were visited by two investigators and the willing participants were given the questionnaire form. Fifteen minutes of time was given and forms were collected immediately. All the data was collected during the month of January 2017. The

participants received a brief on how to fill in the questionnaire and were later checked by investigator in case of any of the questions unanswered.

For the purpose of analysis each correct answer was given score "one" and wrong and left unmarked were given score "zero". The data was entered using Microsoft excel 2010 version and analyzed by EPI INFO version 7. The individual scores were summed up to yield a total score, mean average and standard deviation. Students t-test, ANOVA were applied to find out any significance with  $p < 0.05$  taken as statistically significant.

### Results

A total of 90 participants were included in the present study, of which, 41 (45.6%) were male and 49 (54.4%) were females.

Majority of them (81.1%) have heard about COPRA act. Majority (65.5%) felt that COPRA act is in the favour of the patients. Three fourth of the respondents felt that a good communication between a Doctor and Patient can prevent negligence and its further ramifications. Almost 90% felt that it is necessary for a Doctor to take consent to be on safe side.

Mean awareness score regarding consumer protection act-1986 (COPRA) among the total study population was  $15.8 \pm 3.0$  and the score was better among post graduates ( $15.9 \pm 2.9$ ) compared to faculty and interns but this was not statistically significant ( $p=0.1$ ).

No significant association was observed between mean awareness score and the gender ( $p=0.8$ ) also. Similarly age also had no statistically significant association with mean awareness score ( $p=0.4$ ).

**Table 1: Mean awareness score among different categories**

Category		Number	Mean	SD	P value
Gender	Male	41	15.8	3.0	0.8*
	Female	49	15.6	2.8	
Profession	Interns	30	15.8	2.9	0.1**
	Post graduates	30	15.9	2.4	
	Faculty	30	15.7	3.7	
Age	$\leq 30$ years	68	15.7	2.7	0.4*
	$>30$ years	22	15.9	3.1	

\* Student 't' test \*\* ANOVA

Among the total 90 respondents, 10% (n=9) had experienced a situation where negligence has resulted in damage to patient. About one third (n=31) have heard about indemnity insurance and among them 32% (n=10) have insured themselves.

Majority (94%) have opined that COPRA should be introduced in medical academic curriculum.

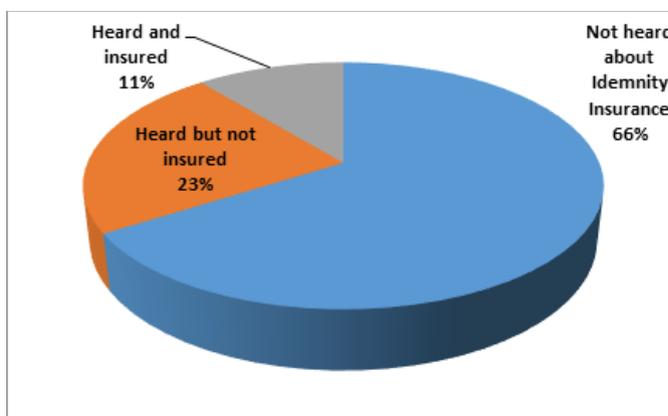


Fig. 1: Respondents heard and insured about INDEMNITY' Insurance

### Discussion

The decision of the Supreme Court to include doctors under consumer protection act 1986 (COPRA) itself stresses the importance of having adequate knowledge among doctors on various aspects on the act. Hence, the present institutional based cross sectional study was done to assess the awareness and knowledge concerned to the COPRA 1986 among the medical professionals.

The study population includes 90 medical professionals and the mean awareness score regarding consumer protection act 1986 (COPRA) was  $15.844 \pm 3.04$ . This finding is in concurrence with the study by Singh K et al (2010)<sup>(4)</sup> from Udaipur city where the mean awareness score was found to be 15.06.

Similar study by Kachare RV et al (2012)<sup>(5)</sup> on junior doctors from Latur, observed that the mean awareness score to be 12.99. A comparative study among doctors from government and private sectors of union territory, Chandigarh, Singh S et al (2016)<sup>(6)</sup> found that the mean knowledge score of the respondents was 15.83 (range 4-24). All these studies including the present study clearly denotes that the level of knowledge of doctors about various aspects of COPRA was very low.

In the present study, no significant association was found between mean awareness score and various levels of medical professionals. Virendar Pal Singh et al (2014)<sup>(7)</sup> also observed no significant difference in the marks scored by the faculty members of the medical and surgical specialties of the Private and Government Medical College.

The present study found no significant association between gender and mean awareness score. This finding is in contrast to the findings by Haripriya A, Haripriya V (2014)<sup>(8)</sup> where it was found that male doctors had more knowledge about medical law and its negligence than female doctors ( $P=0.001$ ).

Regarding the indemnity insurance, the present study found that only about one third had heard about it and among them only about one thirds have insured themselves. In contrast, Kachare RV et al (2012)<sup>(5)</sup>

found that 82.43% Doctors had heard about Medical Indemnity Insurance.

### Limitations of the study

Small sample size and convenient sampling technique used limits the generalisability of the study.

### Conclusions

The awareness level among the doctors in the present study was found to be very low, though the enactment of the COPRA Act 1986 was three decades old. The awareness regarding medical negligence and provisions of COPRA act 1986 is increasing among the public. Hence it is equally important, that the doctors as well should gain adequate knowledge and awareness regarding its scope. It is suggested to organize intensive regular CME's and orientation programs to improve the awareness and knowledge. This actually will help in the long term the medical fraternity to develop and sustain confidence and mutual trust with the clients. It will create a positive healthy atmosphere in medical practice. By this, the number of cases of disputes due to medical negligence will be reduced and reverse the increasing trend in our county.

### Acknowledgements

The authors would like to express their sincere thanks to the Dean and the management of Bhaskar Medical College, Moinabad for their support and the necessary timely guidance while conducting this research project.

**Funding:** None

**Ethical clearance:** Not required.

**Conflict of interest:** None declared

### References

1. Consumer Protection Act, 1986: Bare Act With Short Notes, Universal Law Publishing Co. Lt.;2012.

2. Reddy K.S.N. Medical Laws and ethics. The Essentials of Forensic Medicine & Toxicology. K. Suguna Devi, Hyderabad 28th Edn.2009:49-50.
3. Joga Rao SV. Medical negligence liability under the consumer protection act: A review of judicial perspective. Indian J Urol. 2009;25:361–71.
4. Singh K, Shetty S, Bhat N, Sharda A, Agrawal A, Chaudhary H. Awareness of consumer protection act among doctors in Udaipur city, India. J Dent 2010;7:19-23.
5. Kachare RV, Akhade SP, Rohi KR. Awareness about consumer protection act among junior doctors. Journal of Forensic Medicine, Science and Law. 2012;21(2):2-8.
6. Singh S, Kumar A, Gupta AK, Aggarwal AK. Knowledge of consumer protection act among doctors from government and private sectors of union territory, Chandigarh. Indian J Med Sci 2016;68:5-12.
7. Virendar Pal Singh, Amit Bery, Gautam Biswas, Akashdeep Aggarwal. Awareness about Consumer Protection Act and Medical Negligence among Private and Government Medical College & Hospital Faculty Members. J Indian Acad Forensic Med.,2014; 36(2):150-155.
8. Haripriya A, Haripriya V. Knowledge about Medical Law and its Negligence among Doctors: A Cross-Sectional Study. Int J Sci Res Publ. 2014;4:1–3.