

## Physicians' Interest Measurement towards Islamic Document for Medicine and Health Ethics in Jordanian Public Hospitals

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### Abstract

The current study examined one of the important aspects of health services provision in Jordan, namely the application of Islamic Document of Medicine and Public Health Ethics in Jordanian hospitals. The study aimed to measure physicians' interest towards Islamic document application levels of medicine and public health ethics in Jordanian public hospitals. This study is an observational and analytical study, and represented the sampling unit patients in eight of the Jordanian government hospitals. The study collected data through the questionnaire. Data were analyzed statistically by using Social Packaging Statistical System (SPSS, Ver. 15).

The results indicated that physicians are interested in applying Islamic document of medical and health ethics. The study suggested some recommendations, of which the most important is to educate and motivate employees to practice health ethics as stipulated in Islamic document of health ethics through their general behavior and the performance of their tasks.

**Keywords:** medical ethics; patient satisfaction, and Islamic document.

### Introduction:

Business importance has been increased greatly in the society and its role became active at various levels due to scientific, technological development and communities transition to knowledge era. Nations and peoples are competing by their invents , discoveries , business organizations powerful and their adoption of social and ethical responsibilities, which requires contemporary business organizations to develop a philosophy and work mechanisms within ethical and social framework that link nation's components and represent it in global competition (al-Ameri et al, 2005, p1). Transparency and issuing ethical constitutions or codes that govern workers behavior in various trades became a milestone in public and private business world. It is obvious that each profession has its ethical codes and its own behavior determinants, in the field of health in particular which may differ from the rest of other professions since it has a close relationship with one of human life elements (Ministry of Health, 2006, p3).

Commitments of values and ethical ideals are considered a significant pillar of organizations and management's determination and implementation of plans and strategies (Aldjaafarh, 2009, p 3). Medicine is considered one of the sciences that Muslims paid an attention to , since Islam imposed science in religion principals as individual duty ,and make science with its details and experimental and applied sciences as collective duty (Tamimi et al, 1993, p 330). The Muslim community is a distinct community has its own characteristics and objectives in achieving security and dignity of the human being. Muslims were the first who develop compassion and affection and sympathy principals among people in order to preserve society integrity and protect the same from all harms (Al-Banna, 2005, p 370).

Medicine profession is concerns with great aim of region aims that is keeping the human being .Rapid development in medical sciences has led to a divergence between advanced medical practice nature and between laws and regulations that govern the professional relationship between doctor and patient. This perhaps was behind the need to keep up with scientific development by legal and ethical, in a form the preserves belief principals and take into account the social privacies and achieve social justice between society members (Bashir Hospital,2010, p 1) Islam stressed and confirmed on opinion freedom and expression in secular and religious themes (Alowaimer 2009, p 275). Islam also clear out that every human being has his needs, beliefs and rights, therefore hospital and its staff are responsible for continuous attempt to understand patients requirements and thus respond to these requirements,

which will have a significant impact in improving the services quality provided in hospitals, and improving patient satisfaction and their families (Ministry of Health, 2005, p 1).

Therefore it there is a need for medical profession principles or laws to organize and clarify the relationship between physician and his patients in particular, and between him and the society in general. Communities over centuries placed of medical practice laws which Islamic document of medicine and health ethics, is one of them .Such document was adopted by Islamic and Arab countries (Kaadan and others, 2000, p 7).

### **Study Objectives**

The study aims to achieve the following objectives:

- 1 – To investigate physicians interest levels in applying Islamic Document of Medical and Health Ethics.
- 2 – To find out the significant differences in physicians interest levels applying Islamic Document of Medical and Health Ethics in Jordanian public hospitals, due to demographic variables (educational level, and work experience).

### **Study Statement**

Business ethics nowadays became as an important and necessary issues that business organizations including hospitals are seeking to practice and apply. Because hospitals are one of vital and basic organizations. The two researchers noted varying levels of application Islamic document for medical and health ethics in many public hospitals, so they have the desire to answer the question related to interest of physicians for application of Islamic Document of Medical and Health Ethics in Jordanian hospitals. In this context, the researchers formulated the study statement and to develop hypotheses as follows:

- 1 - Do physicians have any interest in applying Islamic Document of Medical and Health Ethics?
- 2 - Are there significant differences in the physician interest levels of apply Islamic Document of Medical and Health Ethics in Jordanian public hospitals due to demographic variables (educational level, and work experience)?

### **Study Hypotheses**

To achieve the study objectives the following hypotheses were formulated:

H01: Physicians are not interested in applying Islamic document of medical and health ethics.

H02: There are no significant differences in physicians' application levels of Islamic Document of Medical and Health Ethics in Jordanian public hospitals due to demographic variables (educational level and, work experience).

### **Literature Review**

#### **Jordanian Public Hospitals**

Ministry of Health is considered the government agency responsible for all issues related to health in Jordan by virtue of Public Health Law No. (54), for the year (2002). To achieve these tasks, Jordanian Ministry of Health (MOH) developed a comprehensive health policy to ensure delivery of preventive health and treatment care services for all citizens and provide right health environment to ensure healthy society. Jordanian Ministry of Health provide the second health care services and to some extent the third health care services through (30) governmental hospitals, distributed in all provinces in the Kingdom that cover high percentage and comprehensive health services provided to citizens. Such hospitals include (4235) beds that is approximately (38%) of the total hospital beds in the Kingdom for all sectors totaling (11049) bed and (101) hospital in total (Ministry of Health, 2008, p 28).

#### **Medical Ethics**

The history of medical ethics is since the Code of Hammurabi about 2200 BC (Patel, 1999). Then Greek physician Hippocrates declared an oath known as Hippocratic Oath within 460 to 377. The Hippocratic Oath was formulated in the 4th century BC. The oath became the nucleus of all medical ethics.

The oath was modified during the 20th century, but its ethical strength remained. The modified version was written by Lasagna, which eventually became known as the Oath of Lasagna (Epstein, 1994). In 1948, the Second World Medical Assembly adopted a modern equivalent of the Hippocratic Oath. Known as the Declaration of Geneva, the declaration was amended in 1968 and again in 1983. The modern principles of medical ethics were prepared by Thomas Percival in 1803. Lastly Geneva declaration was declared in 1948 and was accepted in 1949 (Talukder et al, 2010).

### **Islamic Document of Health and Medicine Ethics**

The Islamic Organization of Medical Science issued in (1981) an ethical reference that regulates the relationship between health care provider and patients derived from Sharia is "the Constitution of Islamic medical ethics" and which was at the time an important event adopted by most concerned agencies and organizations in the field of medical ethics in the Arab and Islamic countries (Brannigan et al, 2001).

By time new invents emerged, so there is a need to keep pace with events to match with all products of modern science. In (2004) the eighth World conference of the Islamic Organization for Medical Sciences held with collaboration of the World Health Organization, United Nations Educational, the Scientific and Cultural Organization (UNESCO), the Islamic Organization for Education and Science (ISESCO), and the Council of International Organizations of Medical Sciences, and Ajman Science and Technology Network, which in its turn issued the Islamic Document of Health and Medical Ethics, and it was decided to teach this document in Medicine Colleges in Islamic countries and consider the document as a basic constitution for medical ethics in health ministries and trade unions (World Health Organization, 2004, p 1)

The Islamic Document of Medicine and Health Ethics consists of basic articles namely articles related to physician manners, duties, professional relationships, professional responsibilities and rights. Each article displays, detailed terms of particular ethical issue, to cover all points that organize physician patient relationship, which is deemed the main issue in medicine ethics as follows:

**Physician ethics:** a set of criteria that requires health care provider to commit his oath, fidelity sensor and slavery to God, and characterize with nobility and avoiding bad things, and appreciation to those who taught him, and does not hide note and that does not ignore the effort of others, and be a role model in the care of health and do the right body and its general appearance.

**Physician duties:** represent a set of standards that organize physician duties towards patient, physician duties towards his profession, duties towards the community, and himself.

**Professional relationships:** it indicates the commitment importance of maintain profession honor , and contributes in its development scientifically and cognitively through researches, studies , writing articles , continuing education, maintaining medical profession practice standards and improve them in all of its activities, and stay away from all prejudice honesty and integrity in dealing with the patient, and not to lose patient confidence of using methods of fraud and honesty in dealing with patient and not to lose patient's trust by using fraud and establishing abnormal relations with him or one of his family members or money gain in informal ways , and all that would offend medical profession, and avoid seeking to good image at the expense of ethics and principals.

**The responsibilities and professional rights:** which call physician to follow the latest professional developments in his field, and that physician is responsible towards patient to exert the maximum possible care, and do not hesitate to report for any error professional negligence or assessment of the incompetents of his staff, and it is not permissible for a physician to distinguish between colleagues or associates for any reason. He must be fair in treating all patients and non-discrimination, including medical care, and he has to testify before the competent authorities when requested to do so and to take God and his conscience if asked to evaluate a colleague and not to exaggerate praise and undervalue his right.

### **Previous Studies**

This study is deemed as one of the first studies that handle measure physicians of interest levels of Islamic Document of Medical and Health Ethics in Jordanian public hospitals.

— Saif et al (2010) study entitled: Measuring patient satisfaction with implementation level of Islamic Document of Medicine and Health Ethics in Jordanian public hospitals. This study aimed to investigate the impact of Islamic document implementation on patient satisfaction in Jordanian public hospitals. The study was conducted on patients residing in Jordanian public hospitals. A random sample of (500) patients was selected .The questionnaire was distributed over the sample. (392) valid questionnaires were collected, so the response rate was (78.4%). The study results indicated a relationship between the implementation of Islamic Document of Medicine and Health Ethics and patient satisfaction. The study also found that there are significant differences between patients' attitudes towards Islamic document levels of medical and health ethics implementation and expectations for the application of those standards. The study suggested raising awareness and motivates employees to practice health ethics as stipulated in Islamic document of health ethics through their behavior and performance of their tasks, and ensure internal customer satisfaction to the hospital.

— Anzi and Al Adeim (2006) study entitled: Employees recognition of job behavior job and professional ethics: a field study on government agencies in the State of Kuwait. This study aimed to identify employees' perception of job duties, administrative and social responsibility entrusted to them. The study was conducted on government agencies employees in the State of Kuwait. The sample consists of (268) employees working in government agencies. The study concluded that employees do not understand their duties, and the lack of obtaining their job rights, and some employees' realization of administrative and social responsibility, and many categories of employees' non commitment of managerial ethics. The study recommended the need for raising employees perception level of service ethics through designing pre-service training programs and to educate public service employees and implementation of transparency principle in granting all privileges ,allowances and money and moral incentives.

— Derwish (2004) study entitled " Trade Ethics in terms of refraining patient ministering, treatment the and stop CPR" .This study aimed to identify Islam rule in medical profession, and to identify employees' attitudes towards patient ministering and treatment refrain rule. Through studying issues such aspects according to scientific plan. The study concluded that medicine is a noble humanitarian work aimed at maintaining the human being through disease prevention or through disease diagnosis and treatment. Physician must have noble morals regarding his profession and his dealings with patients. Physician is not allowed to leave the patient without ministering or treatment. The study recommended the importance of establishing clear legitimate advisory opinions (fatwa's) y regarding provisions that govern medical profession and the provision of all hospitals and medical centers.

— Mohammed (2002) study entitled "A study of some determinants of staff attitudes toward work ethics in the Kuwaiti business organizations". This study aimed to test the role of age, gender and external factors in determining workers attitudes toward work ethic. The study, have been conducted in the State of Kuwait, the study sample consisted of (411) employs from six Kuwaiti business organizations. The study used the questionnaire to collect data. The study assumed that employee's attitudes towards work ethics will vary according to sex and age, since it is expected that women positions are harder towards unethical work behavior, compared with men, also elder workers had harder attitudes towards unethical work behavior. The study assumed an interactive effect between age and gender in determining workers attitudes toward work ethics. The study also assumed differences in the impact of external factors on ethical behavior of employees and that there is a role for the interaction between age and sex in determining the impact of external factors on employee's ethical behavior. The results of the study pro-hypotheses except hypothesis on the influence of age on workers attitudes toward work ethic, where the results showed sincerity of this hypothesis for men only.

— Hunaiti (2000) study entitled "ethical strategies: Jordanian Government Departments employee's attitudes and opinions: an analytical study" The study aimed to identify employee's views in government agencies in Jordan and their trends on ethical strategies application in these agencies. This study was conducted in the Hashemite Kingdom of Jordan. The study sample consisted of (750) employee in (30) and different ministries. The study used a questionnaire to collect preliminary data. The study concluded those government agencies are implementing official and legal ethics strategies, but there is a weakness in ethical strategies implementation related to leadership.

— Morshed (1999) study entitled "social and ethical responsibility of strategic management in Jordanian industrial public shareholding companies." This study aimed investigates employees' attitudes towards the concepts of social and ethical responsibility, as well as to identify the impact of demographic characteristics in concepts formation and social and ethical responsibility philosophy. The study was conducted on a group of Jordanian industrial companies .Study sample included (198) managers in top management in Jordanian industrial companies. The study used the questionnaire for data collection. Among the most important study findings there is no impact of demographic characteristics in concepts formation and of social and ethical responsibility philosophy. While there was a negative relationship between practicing social and ethical responsibility, ethical and between financial obstacles and legal commitment and managerial obstacles. The study also found a positive correlation between practicing social and ethical responsibility in internal environment, staff and legal obligation.

— Connor (2006) study entitled: "Assessing Organizational Ethics: Measuring the Gaps". This study aimed to compare ethics values and study sample awareness level of everything related to personal ethics, practical ethics, and ethical standards and to clarify the difference between managers and staff perspective. The study was conducted on small industrial enterprises in the United States of America. The study sample consisted of managers in addition to (70) employees. The study concluded there is a gap between managers and employees views of recognizing the ethical standards, in addition the management was more aware and understanding things than employees.

— Kohl and Boo (2004) study entitled: "Organizational Ethics and Employee Satisfaction and Commitment". This study aimed to identify the relationship between business ethics and employee's satisfaction of and the extent of their commitment. The study was conducted in Singapore, on a sample totaling (237) managers. The study concluded that there is a positive relationship between job satisfaction and organizational loyalty, as well as there is a relationship between organization ethics and employee loyalty.

— Spero and George (2000) study entitled: "Business Ethics in the European Union: A study of Greek Attitudes". The study aimed to measure the direction of a particular sector of European Union population towards ethical practices and about eight tasks of ethics values. The study was conducted in Greece on a sample of a Greek university students, a comparison was conducted in terms of sex, age and experience in order to find out whether there were significant differences. The study found that Greek students believe that it is not easy to apply the rules of ethical practices and that people may violate ethics rules if they believe that they will not be discovered. The study also found that Greek students believe that doing what is ethically good on the long run, and it's not necessarily that every good work is good ethically, and managers' work is for the benefit of shareholders only and not for the benefit of employees and customers is unethical. The study also found that Greek students believe that businessmen tend in their fields to ignore ethical considerations while performing their work and they feel that work decisions should not be made without considering the ethical issues or matters. The study found that Greek students' trends were not affected by gender or age, and that religion has an effect on attitudes towards ethics as well as there are no significant differences in students' attitudes due to experience.

### Study Population and Sampling

The study population consisted of physicals in Jordanian public hospitals. A random sample of (290) physicians were selected. A questionnaire was distributed over the sample's subjects, (221) questionnaires were collected, all of which were valid for analysis, so the response rate was (78.4%) of the study sample. **Limitations**

Study limitations are: subjective limits, place, time, and human, as follows:

1. Subjective limits: according to study statement and its objectives, it has been restricted to Physicians' Interest Measurement towards Islamic Document for Medicine and Health Ethics in Jordanian Public Hospitals.
2. Place limits: The study covered eight governmental hospitals in Jordan distributed over all Kingdom provinces. Such hospitals offer (31%) of Jordanian Ministry of Health hospital services since these hospitals are the main and larger in the mentioned provinces. It is clear from the table (1) that studied hospitals are located in the cities, and Bashir Hospital is the first hospital in terms of incorporation (1952). Half of study sample are teaching hospitals and they provide comprehensive health care services.
3. Time limits: The study covers the time as of June to October of (2011).
4. Human limits: researchers focused the process of obtaining the raw data of Physicians in public hospitals because it can be made up to them directions about all of the variables in question given.

### Methodology

By reviewing the study objectives, hypotheses and limitations. The researchers select the descriptive analytical approach, where variables and various factors associated with study problem which handled the knowledge of business ethics in health organizations were described, either independent or dependent variables. The study consists of two main parts, namely theoretical and practical part, the theoretical part is based on published secondary data, while the second part is based on primary data collection from study population subjects. To cover this part the researchers collected the data from books, references and scientific journals, other data was also obtained through reports and bulletins issued by the Jordanian Ministry of Health. Upon the geographical search and human limitations it has been determined that the application should be on Ministry of Health hospitals listed in table (1). The data collection process is focused on physicians who are working in such hospitals.

Table (1): Hospitals study sample, in terms of location, year of incorporation, type of hospital and health service

Hospital Name	Location	Hospital type	Services Type
Bashir Hospital	Amman Governorate	Educational	Comprehensive medical
Princess Basma Hospital	Ibid Governorate	Educational	Comprehensive medical
Prince Faisal Hospital	Zarka	Non-Educational	Comprehensive medical
Hussein Hospital	Salt Governorate	Educational	Comprehensive medical
Karak Governmental Hospital	Karak	Educational	Comprehensive medical
Jamil Altotnge Hospital	Amman Governorate	Non-Educational	Comprehensive medical
Queen Rania Hospital Ma'an	Ma'an Governorate	Non-Educational	Comprehensive medical
Princess Raya Hospital	Irbid Governorate	Non-Educational	Comprehensive medical

### Research Instrument

A designed questionnaire was used to collect the required data consisted of three parts, as follows:

1. The first part, which includes a set of questions relating to physicians demographic information (age, gender, educational qualification, place of residence, marital status, and experience).
2. The second part consists of a set of questions that aimed to measure application levels of the Islamic document of medicine and health ethics from physicians point of view.

### Study Results

This section displays the results and hospitals physicians interest regarding application levels of Islamic Document of medicine and health ethics and explains also hypotheses under consideration.

### Sample's Characteristics

Government Hospitals Physicians Breakdown According to Age,

Table (2): Physicians breakdown according to age, (n=221)

Variable	Frequency	Percentage %
Less than 20	7	3.2
21-30	79	35.7
31-40	44	19.9
41-50	56	25.3
More than 50	35	15.9
Total	221	100

Table (2) indicates that the largest percent, namely (35.7 %) was for those whom their age is ranging from (30-21) years, (25.3 %) of the sample their age ranged between (41-50) years, while (25.3%) of the sample their age is ranging between (41-50), the rest are more than 50 years.

Government Hospitals Physicians Breakdown According to Sex

Table (3): Physicians Breakdown According to sex, (n=221)

Variable	Frequency	Percentage %
Male	155	70.1
Female	66	29.9
Total	221	100

Table (3) indicates that 70.1 % are males and 29.9% are females.

Government Hospitals Physicians Breakdown According to Educational Level

Table (4): Physicians Breakdown According to Educational Level, (n=221)

Variable	Frequency	Percentage %
BSC	71	32.1
MSC	51	23.1
PhD	21	9.5
Friendship	71	32.2
Others	7	3.2
Total	221	100

Table (4) indicates all sample's subjects have university degree. (32.1 %) have BSC, while (23.1 %) has MSC, (9.5%) have PhD years, (32.2%) have friendship and the rest (3.2%) have other degrees.

Government Hospitals Physicians Breakdown According Residence

Table (5): Physicians Breakdown According to Residence, (n=221)

Variable	Frequency	Percentage %
City	172	77.8
Village	35	15.8
Municipality	14	6.4
Total	221	100

Table (5) indicates that the largest percent, namely (77.8 %) are residing in the city, (15.8 %) of the sample are residing in municipality, while (6.4%) are residing in the a countryside

Government Hospitals Physicians Breakdown According to Marital Status

Table (6): Physicians Breakdown According to Marital Status, (n=221)

Variable	Frequency	Percentage %
Single	86	38.9
Married	128	57.9
Divorced	7	3.2
Total	221	100

Table (6) indicates that the largest percent, namely (57.9.7 %) are married, (38.9 %) of the sample are single, while (3.2%) are divorced.

Physicians Breakdown According to Years of Experience

Table (7): Physicians Breakdown According to Years of Experience, (n=221)

Variable	Frequency	Percentage %
Less than 5 years	71	32.1
5-15 years	101	45.7
16-25 years	35	15.8
25+	14	6.4
Total	221	100

Table (6) indicates that the largest percent, namely (45.7 %) have an experience ranging from (5-15) years, (32.1 %) of the sample have an experience less than (5) years and (15.8%) have an experience ranging from (16-25) years, while (6.4%) have an experience more than (25) years.

**Means and standard deviations were computed to describe sample's subject's responses**

1) Descriptive statistics results for actual level variable of implementation level of Islamic Document for Health and Medicine Ethics:

Table (8): Means and standard deviation of subject's responses regarding the implementation of Islamic Document

No.	Statement	Mean	SD.
1	Physicians are characterized by nobility and avoid degrading issues	3.90	.852
2	Physicians listen to of their patients complaint and understand their suffering	3.25	1.16
3	Physicians avoid any thing that prejudice their honesty and integrity in their dealings with the patient	4.04	.740
4	Physicians behave well among each other	3.19	1.32
5	Physicians treatment all patients equally	2.83	1.31
6	Physicians avoid seeking for good images at the expense of profession ethics and its principals	3.20	1.46
7	Physicians inform hospital management with any professional error or omission of their coworkers	2.88	1.49
8	The current situation of Physicians commitment with their duties toward their patients improves health services quality	3.55	.940
9	Physicians are devoted to oath and feel servants of God	3.78	1.00
10	Hospital management bears the consequences of professional errors and negligence toward patients	2.91	1.59
11	The current situation of Physicians commitment with their responsibilities toward their patients improves health services quality	3.65	.934
12	Physicians respects their non Physicians colleagues and do not underestimate their role in patients treatment	3.06	1.51
13	Physicians take necessary action to correct any frequent problems	3.39	1.36
14	The current situation of Physicians commitment with their duties toward their profession improves health services quality	3.55	1.00
15	Physicians respect patient's point of view t, especially in matters related to him personally	3.04	1.40
16	Physicians avoid divulge their patients secrets	3.20	1.465
17	Physicians do not ignore nor underestimate others effort	2.74	1.56
18	Physicians educate patient on his illness and his health	3.64	.964
19	. Physicians do not force patient to a particular medicine without his cones	3.75	1.07
20	Physicians respects patient's right to change his physician, and to obtain the necessary medical report which explains his sick	3.46	1.35
21	The current situation of Physicians commitment with their duties toward their profession relationship improves health services quality	3.27	1.47
22	Physicians inform hospital management about any professional error or omission they made	3.61	.939
23	Physicians try to ease patient's pain by all means available	2.94	1.584
24	Physicians are deemed models in their health care and performing their bodies right	4.12	.718
25	Doctors considered a role model in the care of their health and their body to do the right	3.04	1.55

To explore physicians interest levels towards implementation of medicine and health ethics document, the approved approach was adopted based on previous studies was identified to interpret the results and to judge the response level, since significant means that are equal to or more than (3.6) that there is an application of high elements of the field, and means ranging from (2.31-3.59) indicate that there is a medium application of field elements, which is equal to or less than 2.30) to a low-interest elements of the field and an urgent need for urgent improvements.

Table (8), and by observing standard deviations values, it is noticed that there is a homogenous of sample interest. It was also clear that the fields which achieved high levels of interest are related to paragraphs (1, 3, 9, 11, 18, 22, and 24) or 28% of the paragraphs total. This demonstrates physician's high commitment of integrity standards of, which led to quality of services improvement provided in hospitals. The same table shows that there is an agreement between the government hospital physicians that there is a medium application with paragraphs (2, 4,5,6,7,8,10,12,13,14,15,16, 17,19,20,21, and 25), which constitute 72% of the total paragraphs. And no any paragraph was in low interest which requires fast intervention and processing. These results indicate that the in implementation equally levels among patients, and not ignoring others effort of, and the seek to relieve patient's pain ranking the last. From table (8) it is clear that there is no any area of document areas was of low-interest category which needs to intervene and fast processing.

**Reliability test**

Cronbach Alpha was used to measure the instrument reliability .Alpha value was (91.1%) which is excellent since it is higher than (60%).

**Hypotheses test**

H01: There is no interest among physician in implementing Islamic Document of Health and Medicine Ethics.

H1: There is an interest among physician in implementing Islamic Document of Health and Medicine Ethics

Table (10): Results of first hypothesis test

SD	Mean	Result	SIG t	-t-tabulated	t-calculated
1.04	3.36	Reject	0,00	1,96	5.14

One sample t-test was used to test this hypothesis. Table above indicates that (t calculated = 5.146) is more than its tabulated value. Therefore and according to the decision rule (H0) is accepted if the calculated value is less than the tabulated value and if the significant value (SIG) is more than (0.05). On the other hand (H0) is rejected if the calculated value is more than the tabulated value, and significant value (SIG) is less than (0.05), and the alternative hypothesis is accepted. This means there is an interest among Physicians in implementing Islamic Document of health and medical ethics and.

H02: There is no significant difference in physician inters level in implementing Islamic Document of Health and Medicine ethics in Jordanian public hospitals due to demographic information (Education and experience).

H2: There is a significant difference in physician inters level in implementing Islamic Document of Health and Medicine ethics in Jordanian public hospitals due to demographic information ( Education and experience).

Table (11): Results of second hypothesis

Variable	ANOVA			H0 Result
	F-Calculated	-Tabulated F	-Sig F	
Educational Level	25.362	2.37	0,00	Reject
Experience	35.944	2.60	0,00	Reject

ANOVA and t-test for independent sample was use to test this hypothesis. Table above shows that F calculated values is more that F- tabulated value with significance rate of (p<0.05).. Therefore we reject null hypotheses and accept the alternative ones which mean that there are significant differences. The difference were in the favor of friendship and for the experience that exceeds (25) years

**Conclusions**

Based on the previous the following conclusions can be derived:

1. There is an interest among Physicians in implementing Islamic Document of Health and Medical Ethics.
2. There are significant differences in the level of interest in Physicians implementation of Islamic Document of health and medical ethics in Jordanian public hospitals due to demographic variables (education and, work experience), The differences are in favor of fellowship holders, and for the favor of those who have more than (25) years experience.

3-Improvement of Islamic document application medicine and health ethics will lead to improve health services quality in Jordanian public hospitals

4-There is a weakness in the reporting mechanisms for medical errors in Jordanian hospitals.

### Recommendations

1- To support and to follow up the implementation of Islamic Document of Health ethics text through Ministry of Health department - or through the establishment of a neutral specialized department.

2.To increase hospital keen on guidance, awareness and identifications of health ethics and the correct methods and procedures to be implemented which are no doubt represent an important element is patient relationship, which is reflected positively on their satisfaction.

3. There is a need to educate and motivate employees to practice health ethics as stipulated in Islamic Document of health ethics through their behavior and performance of their tasks.

4. The researchers recommended through the results of implementing the elements of Islamic document levels of Business Ethics in Jordanian hospitals to improve and implement this document and disseminate among employees.

6. Holding training courses for hospitals employees that contribute in communicating awareness of compliance importance of aspects that support health service quality improvement and increase patient satisfaction.

7. Hospitals management has to develop a policy for reporting medical errors free of blame for encouraging workers and to prevent recurrence of mistakes

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