

ETHICAL CLIMATE, ETHICAL BEHAVIOR AND PROFESSIONAL VALUES AS PERCEIVED BY STAFF NURSES' AT TWO DIFFERENT HOSPITALS

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ABSTRACT

Background: Assessment of staff nurses' perception regarding ethical climate, ethical behavior and professional values can help nursing administrators to discover more successful strategies toward improving their well-being and decreasing work-related stress. **Aim:** The present study was conducted to investigate the relationship among ethical climate, ethical behavior and professional values as perceived by staff nurses at two different hospitals. **Design:** Descriptive correlation for comparative design was utilized to achieve the aim of the present study. Setting: The present study was conducted at two different health care (private and teaching) sectors. **Subjects:** Convenient sample of staff nurses (n=194) who agreed to share in this study. They were divided as follows: (n=89) from private hospital and (n=105) from teaching hospital. **Tools:** Data were collected using three questionnaires: ethical climate (26 items), ethical behavior (12 items) and nurses' professional value (26 items). **Results:** The study illustrated that there was no statistically significant difference among total perception of staff nurses' regarding ethical climate, ethical behavior and professional values at private and teaching hospitals ($p=0.16$, $p=0.34$ and $p=0.28$) respectively. Staff nurses had high mean % regarding their perception of professional values (87.66%), ethical behavior (86.74%), and ethical climate (83.32%). There was a strong positive statistically significant relation between total perception of ethical climate, ethical behavior and professional values ($p=0.00$). Finally, a strong positive statistically significant relation among total staff nurse's perception of ethical behavior and professional values ($p = 0.00$). **Conclusion:** There were no statistically significant deference among total perception of staff nurses toward ethical climate, ethical behavior and professional values at private and teaching hospitals. There was a strong positive statistically significant relation between total perception of ethical climate, ethical behavior and professional values. **Recommendations:** Nursing administrators should support achievement of ethical climate, nurses should update their knowledge regarding professional nursing ethics, through engaging periodically in workshop and training programs and nursing educator should integrate ethical practice into nursing curricula.

Keywords: *Ethical Climate, Ethical Behavior, Staff Nurses, Professional Values, Private Hospital and Teaching Hospital*

INTRODUCTION

Ethics is crucial to all professions at different healthcare sectors. The major role of nursing is to maintain, support, and optimize health and facilitate healing. They alleviate suffering during applying appropriate treatment for individuals and communities. Nursing ethics is a significant component of nursing as a profession to remain each nurse responsible for patient care in framework of laws Yuhanis, 2016; Elghareb, 2019.

Ethical issues are affected by ethical climate of the work setting, that gives a share to the practitioner's ability to determine and deal with it in order to provide patients with ethical quality care (Bartholdson, Sandeberg & Lu, 2016). Therefore, hospitals create an ethical climate that provides the nurses with power to express themselves in patient care plan, apply the required patient care away from conflicts, be consistent to patient rights, protect people's respect, moral sensitivity by using their ethical decision-making skills (Cerit & Özveren, 2019).

Nurses are faced with daily ethical issues during providing different activities of patient care. Ethical climate considers a significant element in healthcare working environment. It has a major impact on practitioners' ethical decision-making skills and ethical behavior (Lemmenes *et al.*, 2018).

Ethical climate was defined by Olson (1998) as personnel perception of attitude and actions within an organization that serves as a base for employee performance. Also, Elçi & Alpkan (2009); Abadiga *et al.*, (2019) and Koskenvuori, Numminen & Suhonen (2019) defined it as a common perception of the accurate ethical behavior and the approach that ethical concerns should be dealt with. Ismail & Yuhanis (2018) reported that it means a combination of employees' perception toward their organization ethical principles.

Previous studies in the same context was done by Numminen & Leino-kilpi (2015) and Dinc & Huric (2017) and found strong association among ethical climate, intention to leave, self-competence, work satisfaction and quality of care. On the other hand, Aly & Hashish (2017) found a negative significant association between nurses' intention to leave the ethical climate.

However, ethical climate perceptions of nurses are significant indicators to present nurses' care based on moral sensitivity, ethical standards, trust and honesty. It is the determinant factor in creating a strong organizational structure including employees' quality of life at hospitals, motivation, commitment, job satisfaction, conflict prevention, recognition of ethical problems and determination of appropriate ethical approaches in offering quality health care services (Cerit & Özveren, 2019).

Biswas & Giri (2016) and Farkhani *et al.*, (2017) mentioned that ethical behavior is important in institutes not only to ensure actions which would be right and proper, but it is necessary as it boosts morale, help make the best use of resources and manage to do work effectively and harmoniously. It is a fundamental feature of professional nursing.

Bishop (2013) defined ethical behavior as a reversal reflex technique and common training, that deal with the employees' ethical behavior, depend on developed and disseminated standards of personal values. Moreover, Shah, Anwar & Irani (2017) reported that it is an ethically established true and good contrasting to evil or incorrect in a specialized setting.

Blašková & Poláčková (2018) emphasized that it is the expected standards of action and behavior.

Nwankwo, Obi & Sydney-Agbor (2013) and Farkhani *et al.*, (2017) emphasized that the ethical behavior of nurses demonstrate positive behaviors, such as organizational citizenship behavior, increase individual, group, and organizational performance. Also, it enhances the effectiveness and reliability of an organization as staff safeguards the ethical codes of their profession and it confirms the harmony between the staff and their organization. Văduva (2018) added that it initiates an improvement in customer satisfaction for the total experience at the organization and converted to its benefit.

Elghareb (2019) recommended that staff nurses should be encouraged for updating their knowledge regarding ethics through sharing in educational programs. Adding, construction of an evaluation checklist for nursing ethics will help to reveal points that required improvement. Bijani, Tehranineshat & Torabizadeh (2019) showed that values are perception regarding what is true, correct and acceptable.

Butts & Rich (2020) values are a component of ethical systems that attempt to set or appraise ethical behaviors. According to Cambridge Dictionary (2017), it is the principles that helps personnel to perform a decision concern what is true and bad and how to deal with in a diverse situation. Rabia, Ismaile & Househ (2017) and Mohamed & Mohamed (2018) mentioned that nursing values are an essential component that required for upkeeping of standards in the profession. Blais & Hayes (2015) documented that it serves as guideline while introducing safe quality care.

Weis & Schank (2009) stated that professional values are bases for activities that are established by professionals and individuals, and used to evaluate the congruence of the personnel or organization. Alkaya, Yaman & Simones (2018) documented that it consists of concepts and principles of behavior that offer fundamental standards to evaluate objectives and activities, it was created by employee loyalty to the profession. Professional and personal values of providers affect their decisions. Improving awareness of personnel across healthcare about values can improve quality of making decisions concerning patient care (Goodyear-Smith, 2016).

The code of ethics for nursing in many countries was developed by American Nurses Association's to clarify and anticipate their professional values. Professional values will contribute to improve quality of patient care and are affected by working environments (Monroe, 2019; Abdullah & Chong, 2019). High professional values in nursing increase job satisfaction, improved patient care and increased patient satisfaction. Also, it enhances nurses' professional lives, decrease emotional tiredness, improve personal success and collaborations among different practitioners of healthcare team Cetinkaya-Uslusoy, Pashı-Gürdoğan & Aydınl, 2017; Kaya & Boz, 2019.

Appreciate how professional nurses detect, understand and apply professional values is an essential phase in enhancing practice and quality of patient care (Sibandze & Scafide, 2018). Therefore, this study aims to investigate relationship among ethical climate, ethical behavior and professional values as perceived by staff nurses.

Significance

Aly & Hashish (2017) and Constantina, Papastavrou & Charalambous (2019) reported that hospitals challenged to retain nurses' generation and try to identify why they leave their career. Acquiring information concerning the impact of ethical climate can assist leaders to efficiently deal with improper behaviors, maintaining care quality and improving their well-being.

Research by Toubiana & Yair (2012) indicated that ethical behavior consider an important guide principle in the work environment. Tehranineshat, Torabizadeh & Bijani (2020) concluded that increasing knowledge regard nurses' professional values and ethical climate at work environment can assist nursing managers to determine suitable strategies to increase satisfaction and decrease burnout and work stress. Arries (2020) emphasized that professional values affect nurses' behaviors. Therefore, it may provide evidenced information for curriculum improvement and effective educational strategies to expand students' clinical and professional competencies.

In Egypt, there has been very few empirical research studies concerning ethics in general were done and specifically related to the study relationship among ethical climate, ethical behavior and professional values of staff nurses. Therefore, results of the current

study will identify the needed changes that would be valuable for healthcare leaders and educators to promote ethics, develop strategies to develop nursing competencies, improve their well-being, decreasing work-related stress and identify areas that need support among them. Also, it will generate new information regarding staff nurses' perception of variables under study that will enhance nursing as a profession.

METHODOLOGY

Aim of the Study

The current study was done in order to investigate relationship among ethical climate, ethical behavior and professional values as perceived by staff nurses at two different hospitals. The following questions were developed to fulfil the previous aim:

- Is there a difference in staff nurse's perception of ethical climate, ethical behavior and professional values by sector?
- Is there a relationship among ethical climate, ethical behavior and professional values as perceived by staff nurses?

Design

Descriptive correlational comparative design was utilized to achieve the objective of the present study.

Setting

The present study was conducted at two different health care (private and teaching) sectors. Each of them includes: critical care units, medical units, surgical units, and other units such as kidney dialysis units, obstetric units, plastic surgery unit and general ward. Each hospital sector has the same corresponding patient services type.

Subjects

All convenient staff nurses (n=194), who agreed to participate in the study at time of data collection, were include. They had at least one year of experience in the working area. They divided as follows: n=89 from private hospital and n=105 from teaching hospital. Most of them n=108 were female and n=86 were male. The majority of them was working full time at both hospitals. The highest percentage of them had bachelor degree, followed by associate degree, while the least percentage had diploma.

Tools for data collection: The present study data

were collected using three tools:

1- First Ethical Climate Questionnaire: Composed of two parts:

a: Personal Characteristics Data Sheet: It was developed by the investigator and includes such data: gender, age, marital status, level of education, experience in nursing profession, working unit, working status and attendance to ethics courses.

b: Ethical Climate Questionnaire: This questionnaire was developed by Claeys *et al.*, (2013) and modified by the investigator to assess ethical climate within health care organizations as perceived by staff nurses. It is composed of five dimensions and 26 items. They are as follows: relationship with other healthcare team workers (8 items), relationship with managers (6 items), relationship with peers (6 items), relationship with patients (5 items) and relationship with organization (3 items).

2- Ethical Behavior Questionnaire: This was developed by Emery (2016) and modified by the investigator to assess staff nurses' ethical behavior. It contains 12 items subdivided into three domains as follows: moral courage (4 items), moral ownership (3 items) and moral efficacy (5 items).

3- Nurses Professional Value Questionnaire: Modified from Caldwell & Miller (2016) to assess staff nurses' professional values. Constructed from 26 items divided into 5 domains as follows: caring (9 items), activism (5 items), trust (5 items), professionalism (4 items) and justice (3 items).

Scoring System

Ethical climate, ethical behavior and professional values questionnaire items were assessed using three-point liker scale (agree=3, uncertain=2 and disagree=1).

Tools Validity and Reliability

Validity

Study questionnaires content validity was determined by a panel of three experts, two professors and one assistant professor from Faculty of Nursing, Cairo University after English to Arabic translation. Each expert on the panel was asked to examine the instrument for content, coverage, clarity, wording, length, format and overall appearance.

Pilot Study

After questionnaires construction, investigators

conducted a pilot study to test applicability and visibility of the questionnaires and approximate the needed time to fill in them. Suggested modifications depend on the feedback gathered from the pilot were made. Time consumed for fill in questionnaires was ranged between 20 and 25 minutes, results of pilot study was not included in the study sample.

Reliability

Reliability test was calculated using Cronbach's Alpha Coefficient for the study sample questionnaires, which indicates that reliability for ethical climate questionnaires, ethical behavior and professional value were 0.90, 0.80 and 0.93 respectively that means they were highly reliable.

Ethical Consideration

The purpose and nature of the current study had been identified to all staff nurses who constitute the study sample. Explanation was done through conducting an interview with each one of them. Participants were provided with a chance to accept or to refuse sharing in the current study and assured for confidentiality of their information that will be utilized only for research purpose.

Procedure

Permission was taken from the hospital administrators after clear explanation to the nature of the study. Investigators explained the aim and purpose of the present study for staff nurses to attain their agreement to share in this study and to the head of each unit to gain their cooperation during data collection phase. Questionnaires were given individually to every staff nurse during morning shifts at their workplace and collected at the same shift. Collection of data was completed over two months during the period of November to December 2019.

Statistical Design

Statistical analyses were done using computer software the Statistical Package for Social Studies (SPSS), version 21. Descriptive statistics were done such as frequencies and percentages for qualitative variables; means and standards deviations for quantitative variables. Correlation coefficient (r) test was used to determine relationship among variables, and independent *T*-test. Statistical significance was considered at *p*-value <0.05.

RESULT

Table 1: Percentage Distribution of staff Nurses' According to Their Personal Characteristics (n=194)

Variables		N	%
Gender	Male	86	44.3
	Female	108	55.7
Age	< 20	11	5.7
	21 -< 25	79	40.7
	26 -< 30	4	2.1
	> 30	100	51.5
Marital Status	Married	80	41.2
	Single	114	58.8
Unit	Medical	28	14.4
	Surgical	36	18.6
	Critical care units	120	61.9
	Others	10	5.1
Experience in nursing profession	< 5 years	83	42.8
	5- < 10 years	62	31.9
	> 10	49	25.3

Table 1 shows that more than half of the staff nurses, 55.7% and 51.5%, respectively were female and were in the age group of 30 < years old. Also, the table clarifies that 58.8% were single, 61.9% were working in critical care units and 42.8 % had < 5 years' experience in nursing profession.

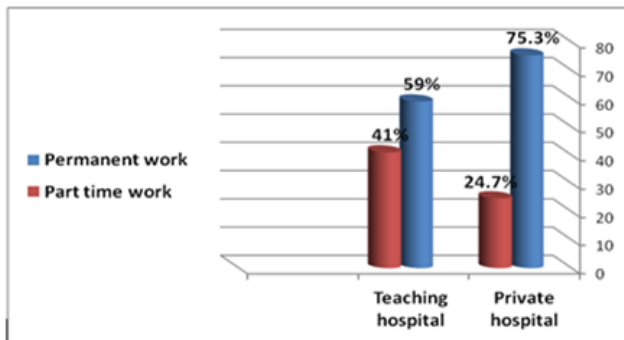


Figure 1: Frequency Distribution of Staff Nurses by Their Work Status (n=194)

Figure 1 illustrates that 75.3% of staff nurses working at private hospital had permanent work while 59% of staff nurses working at teaching hospital had permanent work.

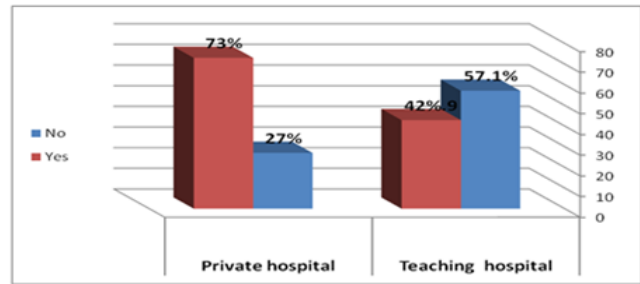


Figure 2: Frequency Distribution of Staff Nurses by Their Attendance to Ethics Courses (n=194)

Figure 2 demonstrates that most of staff nurses (73%) at private hospital had courses about ethics. Also, 57.1% of staff nurses at teaching hospital had ethics courses.

Table 2: Comparison of Perceived Staff Nurses' Mean Scores Regarding Ethical Climate Domains at Private and Teaching Hospitals (n=194)

Domains of ethical climate	Private hospital (89)		Teaching hospital (105)		t	P
	\bar{x}	SD	\bar{x}	SD		
Relationship with other healthcare team workers	18.87	4.40	19.59	2.76	-1.37-	0.17
Relationship with manager	15.67	2.72	16.36	1.82	-2.09-	0.03
Relationship with peers	10.04	1.90	10.50	1.30	0.03	0.04
Relationship with patients	12.22	3.11	12.62	2.27	-1.04-	0.29
Relationship with hospital	7.14	1.84	6.78	1.61	0.14	0.36
Total	63.96	12.20	65.86	6.00	1.40	0.16

Table 2 illustrates that there was no statistically significant difference ($t=1.40$, $p=0.16$) between staff nurses' total perception of ethical climate at private and teaching hospitals, while there were negative statistical differences ($t=-2.09$, $p=0.03$) in the relationship with managers domain. Also, a weak statistical difference ($t=0.03$, $p=0.04$ in relation with peers at private and teaching hospital.

Table 3: Comparison of Perceived Staff Nurses' Mean Scores Regarding Ethical Behavior at Private and Teaching Hospitals (n=194)

Ethical behavior Domains	Private hospital (89)		Teaching hospital (105)		T	P
	\bar{x}	SD	\bar{x}	SD		
Moral courage	9.78	2.15	9.98	1.45	-0.747-	0.45
Moral ownership	7.93	1.194	8.12	1.16	-1.12-	0.26
Moral efficacy	13.24	1.91	13.34	1.64	-0.37-	0.70
Total	30.96	4.00	31.44	3.01	-0.95-	0.34

Table 3 illustrates that there were no statistically significant differences among all domains and total staff nurses' perception of ethical behavior at private and teaching hospitals ($t=-0.95$ and $p=0.34$).

Table 4: Comparison of Perceived Staff Nurses' Mean Scores Regarding Professional Value at Private and Teaching Hospitals (n=194)

Professional Value	Private hospital (89)		Teaching hospital (105)		t	P
	\bar{x}	SD	\bar{x}	SD		
Caring	24.51	3.13	24.68	2.64	-0.40-	0.68
Activism	11.77	2.80	12.31	2.27	-1.47-	0.14
Trust	13.25	2.27	13.51	1.73	-0.88-	0.37
Professionalism	10.03	2.35	10.31	1.88	-0.92-	0.35
Justice	8.10	1.37	8.13	1.29	-0.16-	0.86
Total	67.68	9.29	68.96	7.40	-1.06-	0.28

Table 4 clarifies that there were no statistically significant differences between all domains and total staff nurses' perception of professional behavior at private and teaching hospitals ($t=-1.06$ and $p=0.28$).

Table 5: Mean, Standard Deviation and mean percent of Total Nurses' Perception Regarding Ethical Climate, Ethical Behavior and Professional Values (n=194)

Variable	Min	Max	$\bar{x} \pm SD$		Mean %
Ethical Climate	41.0	78.0	64.99	9.39	83.3
Ethical Behavior	19.0	36.0	31.22	3.50	86.7
Professional Values	40.0	78.0	68.37	8.32	87.7

Table 5 indicates that nurses perceived professional values, ethical behavior and ethical climate (87.66%, 86.74% and 83.3 % respectively).

Table 6: Correlation Matrix of Total Nurses Perception Regarding Ethical Climate, Ethical Behavior and Professional Values at Private and Teaching Hospitals (n=194)

Domains		Ethical Climate	Ethical Behavior	Professional Values
Ethical Climate	P	1	-	-
	R			
Ethical Behavior	P	0.430**	1	-
	R	0.000		
Professional Values	P	0.544**	0.588**	1
	R	0.000	0.000	

**Correlation is significant at the 0.01 level (2-tailed)

Table 6 displays that there was positive statistically significant relation among total staff nurses' perception of ethical climate, ethical behavior and professional values ($p=0.00$). Additionally, a statistically significant

relation between perceived ethical behavior and professional values ($p=0.00$) of staff nurses.

Table 7: Relationship among Staff Nurses' of Perception Ethical Climate, Ethical Behavior and Professional Value and Their Personal Characteristics (n=194)

Variables	Test	Ethical climate	Ethical behavior	Professional values
Gender	T	0.06	-1.07-	-1.55-
	P	0.95	0.28	0.12
Marital Status	T	-1.21-	0.24-	-2.26-
	P	0.22	0.80	0.02
Age	F	1.93	1.08	2.10
	P	0.09	0.37	0.06
Qualification	F	6.75	3.83	4.22
	P	0.00	0.02	0.01
Experience in Nursing Profession	F	3.74	2.16	4.67
	P	0.02	0.11	0.01
Job Status	T	-0.65	-1.05-	-1.82-
	P	0.51	0.29	0.06
Attendance to Ethics Courses	T	1.91	2.34	2.46
	P	0.05	0.02	0.01

Table 7 demonstrates that there was a statistically significant differences between total staff nurses' perception of ethical climate, ethical behavior and professional values and their qualification ($p=0.00$, $p=0.02$ and $p=0.01$ respectively). Also, there was a statistically significant differences between total perception of ethical climate and professional values and their experience in nursing profession ($p=0.02$ and $p=0.01$ respectively) and their attendance to ethics courses ($p=0.05$, $p=0.02$ & $p=0.01$ respectively).

DISCUSSION

Nafei (2015) and Abadiga *et al.*, (2019) reported that ethical climate has developed as one of the main components of the workplace environment's ethical characteristics. It is an element of an organization that is composed of mutual perceptions of right ethical behaviors and method of handling with unethical behaviors. Complexity of ethical issues in the healthcare organizations has increased; therefore, attention to nursing ethics occurred. Tanrıverdi (2017) & Bijani and Tehranineshat & Torabizadeh (2019) mentioned that nurses' professional value represents a significant component of healthcare that directs their roles in care giving and shapes a base for nursing practices.

Findings of the present study revealed that there were no statistically significant differences between total perception of staff nurses toward ethical climate at private and teaching hospitals. This could be attributed to

nature of nursing profession as it is considered one of humanity fields that concerns with saving human lives. Also, similarities in ethical standards govern ethical issues. In the same context a study in agreement with done by Laratta (2010) who found in Japan respondents showed similarity regarding ethical climate perception between government officials and executive of non-profit directors. The previous result was contradicted with Ghorbani *et al.*, (2014) who found that nurses at private hospital perceived ethical climate positively than public hospital nurses. Moreover, these results are opposite to Constantina, Papastavrou & Charalambous (2019) who found positive ethical climate perception by nurses who were working on units of oncology compared to recruited nurses from two national nursing oncology conferences.

Regarding ethical behavior results of the current study it is illustrated that there were no statistically significant differences between all domains and total staff nurses perception of ethical behavior at private and teaching hospitals. This could be due to over self-control of staff nurses to their behaviors especially that encounter ethical issues, and also there was a close supervision and identified guidelines in handling ethical dilemmas in the private and teaching hospitals. Furthermore, nurses relate their behavior to rules and principles that developed through religious and culture influence.

Contradictory to this result a study has been done by Venezia, Venezia & Hung (2010) but in different field rather than nursing that found apparent distinction of respondents' perception of ethical behavior between two sectors that involve private and public. In the same respect, Alleyne, Cadogan-McClean & Harper (2013) found that there was a different ethical behavior between different students' specialist.

Results concerning professional values was clarified that there were no statistically significant differences between domains and staff nurses' perception of professional behavior at private and teaching healthcare settings. This could be due to similarity in education at different nursing institution which stresses the internalization and application of the main values of nursing profession. In the same context it was supported by Parandeh *et al.*, (2015) and Posluszny & Hawley (2017) who documented that no difference was found between nurses and student nurses regarding their scores of professional values.

This is in contrast to the results evidenced by Bijani, Tehranineshat & Torabizadeh (2019) who found significant differences of perceived professional values among instructors, students' and nurses. Poorchangizi *et al.*, (2019) who documented a significant difference between nurses and nursing students' perception of their professional values, also clarified that student had more positive attitude.

As regards staff nurses highly perceived professional values, ethical behavior and ethical climate. This was in the same line with Sajari, Haron & Ismail (2019); Abdullah, Sulong & Said (2019) and Barimani *et al.*, (2019) who found that the respondent perceived ethical climate highly. The result was opposite to study done by Farsaraei *et al.*, (2017) who reported that respondents perceived ethical climate negatively.

Additionally, a study has been done by Lubbe, Lubbe & Nicolaidis (2019) which revealed that employees' behavior of medical device industry was perceived as ethical. Cetinkaya-Uslusoy, Pasli-Gürdoğan & Aydınli (2017); Erkus & Dinc (2018); Torabizadeh, Darari & Yektatalab (2019) and Tuna & Sahin (2020) emphasized that participants had a strong professional value.

Also, some results displayed that there was positive statistically significant relation among total perception of staff nurses' regarding ethical climate, ethical behavior and professional values. This could be due to presence of ethical climate at any organization that support and enhances application of ethical behavior and professional values. This was supported by Lu & Lin (2014) who stated that ethical climate positively correlated with employee ethical behavior. Additionally, Tehranineshat, Torabizadeh & Bijani (2020) found significant statistical association between professional values of nurses and ethical climate.

Results showed statistically significant difference between total perception of staff nurses' regarding ethical climate and their qualification. This could be rationalized as different depth and breadth of ethics education. In agreement with this result, Constantina, Papastavrou & Charalambous (2019) found relation between total ethical climate perception and participants' educational degree.

Previous result is held contradictory with Miandoab *et al.*, (2015) who mentioned that there was no significant difference between perception of participant to ethical

climate and their educational degree, but found a significant association between ethical climate and job experience. Jahantigh *et al.* (2015); Bansal *et al.*, (2019) and Shafipour *et al.*, (2016) stated that there was not any significant relationship between demographic data with nurse's desired ethical climate ethical behavior, professional values and their qualification.

Furthermore, the results of the present study indicated significant difference between staff nurses' total perception of professional values and years of experience in nursing profession. This was supported by Poorchangizi *et al.*, (2017) who found a statistically significant relation between professional values of nurses' and years of experience at work. Previous results are in disagreement with Torabizadeh, Darari & Yektatalab (2019) who found operating room professional values not to correlate with their years of experience.

CONCLUSION

Study results concluded that there were no statistically significant differences between total staff nurses' perception of ethical climate, ethical behavior and professional values at private and teaching hospitals. Nurses highly perceived professional values, ethical behavior and ethical climate respectively. There was a strong positive statistically significant relation between total perception of ethical climate, ethical behavior and professional values. Finally, there was a strong positive statistically significant relation between total staff nurses' perception of ethical behavior and professional values.

The following recommendations were made based on the study results:

- Administrators should support achievement of ethical climate that enhances ethical behavior and professional values by frequent evaluation of ethical principles application, creating collaborative work group, maintaining feedback system etc.
- Nurse managers should make sure of the participation of appropriate nurses and application of ethical decision making.
- Nurses should update their knowledge regarding professional nursing ethics through engaging periodically in workshop and training programs.
- Nursing educator should integrate ethical practice into nursing curricula in order to prepare student nurses to deal with ethical issues.

Future studies should include:

- Assessment of different healthcare professional perception.
- Assessment of factors that affect ethical and professional values.
- Relation of study variables with staff nurses' satisfaction, quality of performance and productivity.
- Replicate the study in large sample to assure generalization of results.

Conflict of Interests

The authors declare that they have no conflict of interest.

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