APPLICABILITY OF HEALTHCARE PROVIDER'S RIGHTS IN NIGERIA: THE NATIONAL HEALTH ACT 2014 IN FOCUS*

Abstract

In matters of medical negligence or medical malpractice, attention is always focused on the enforcement of patient's rights against healthcare providers and health establishments. Not much attention has been given to the ethical and legal rights of healthcare providers and how their rights should be protected in their contractual relationship with the health establishments or the patients who have breached their rights. Most Medical Doctors and other allied medical practitioners are often victims of medical rights violations by the health establishments that offered them employment and yet no health establishment has been held liable for these right violations. Sections 21 and 22 of the National Health Act 2014 and relevant ethical rules of the Code of Medical Ethics, 2008 were all relevant to this research. Doctrinal research methodology was employed by the writer. The researcher found that, notwithstanding that the National Health Act, of 2014 has changed the narrative by making provisions for the rights of Health Care Providers in Sections 21 and 22, it has not been implemented optimally. It is also found that most healthcare providers are ignorant of their rights as provided by the Act. It recommended that vigorous awareness campaigns and advocacy should be embarked upon to sensitise the healthcare providers on the necessity for them to know their health rights and enforce their rights against the health establishments, government or individuals in times of breach. Civil Society Organisations (CSOs), Non-Governmental Organisations (NGOs) and the National Orientation Agency are all enjoined to be part of this awareness campaign. It is also recommended that the caregivers' rights should be introduced as a discipline and be integrated into the academic curriculum of Nigerian medical schools.

Keywords: Healthcare Providers, Health Rights, Health Care, Applicability, Allied Medical Professionals, National Health Act

1. Introduction

Human rights are universal and inalienable. Hence, every human being is a beneficiary of these rights including health care providers. These rights include the right to health, the provision of a safe work environment for the employee by the employer, and the obligation of the health establishment to respect the rights of the health care providers under their employment. Health establishments could be either the government and its agencies or private medical facilities. It has been observed that among academics, health/medical law practitioners and medical practitioners, the most recurrent topic for discussion is always focused on the protection of patients' rights. Not much attention has been given to the discussions on the rights of the HCP and other allied medical practitioners. Perhaps, a lack of attention to the healthcare provider's rights could be because the patients are considered more vulnerable than the healthcare givers in the process of healthcare delivery. Another reason could be due to a lack of awareness of HCP's rights by healthcare providers and healthcare establishments. It is, therefore, germane to discuss herein such health rights and encourage health care providers generally to seek redress administratively or through the judiciary when their rights are breached. These rights could be statutory or ethical, enforceable against the health establishments. The scope of this work is the right of Doctors, which by extension applies to other allied healthcare professionals.

2. Clarification of Concepts

Health Care Providers

The Concept of 'healthcare providers' means all persons providing health services under the National Health Act or any other Law. The provider must be authorized to diagnose and treat the physical or mental health conditions of a patient. The health care providers are Doctors of medicine, Nurse practitioners, Dentists, optometrists, nurse-midwives, clinical social workers and physician assistants, surgeons and other allied health care professionals, ²etc. Healthcare providers can be called healthcare professionals, clinicians, health practitioners, caregivers or primary care providers.

Health Care Personnel

This includes healthcare providers and health workers.³ This is better described as stakeholders in health care delivery, who carry out the healthcare services. The stakeholders here include physicians, Physician Assistants, Psychologist, Nurses, Physical Therapist nurses, nursing assistants, therapists, technicians, emergency medical service personnel, dental personnel, pharmacists, laboratory personnel, autopsy personnel, students and trainees, contractual staff not employed by the health-care facility, and staff not directly involved in patient care but potentially exposed to infectious agents that can be transmitted to and from HCP and patients.⁴ The U.S. Department of Health and Human Services defined healthcare personnel as 'all paid and unpaid persons working in healthcare settings who have the potential for

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¹ National Health Act (NHA) 2014 s 64

² 29 CFR § 825.125 - Definition of health care provider, https://www.law.cornell.edu/cfr/text/29/825.125

³ NHA s 64

⁴ https://www.reliasmedia.com/articles/21394-who-are-health-care-personnel accessed 21 March 2024.

exposure to patients and/or to infectious materials.' Contamination of infectious diseases from the patients being an element of health care personnel includes infections from the body substances of the patient; contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air. Bridg Model Dictionary defines healthcare personnel as 'A person licensed, certified or otherwise authorised or permitted by law to administer healthcare in the ordinary course of business or practice of a profession. It is referred to as a person who administers medical interventions with the intent to improve the physical or emotional health status of the patient whether directly or indirectly. In a nutshell, healthcare personnel is a qualified paid or unpaid person or medical worker in a healthcare establishment whose actions have helped to intervene in the health condition of the patients, and this makes him exposed to being infected by the patient. Any person who has this status is referred to as a health care personnel.

Healthcare Services

According to the National Health Act 2014, healthcare services are defined as services that are preventive, protective, promotive, curative and rehabilitative concerning physical, mental and social well-being.⁷ The writer shall from now on discuss some relevant healthcare providers.

3. Relevant Health Care Providers

Healthcare providers include doctors, physicians, surgeons, nurses, pharmacists, laboratory scientists and other allied medical professionals. They are all stakeholders in health care delivery, who are usually the victims of health rights violations by the health care establishments and even some patients.

Doctors

Doctors in this context include physicians and specialized physicians in various areas of medical practice, like surgeons, dermatologists, endocrinologists, gastroenterologists, immunologists, Neurologists, oncologists, obstetricians gynaecologists, etc. The writer chose to focus on surgeons since they are significant specialized stakeholders in health care delivery and often victims of right denials due to numerous negligent cases in surgical practice. The surgeon remains the principal who oversees the quality of safety care in the operating room and is responsible for the outcome of the patient's care. The activities of the surgical team are to be coordinated by the surgeon. Proper diagnosis to determine the necessity of surgery on the patient for the best interest of the patient is the responsibility of the surgeon. The essence of the surgery should be to correct deformities, repair injuries, prevent and treat diseases, and restore the patient to good health. As a healthcare provider, adequate professional skills should be applied to ensure safe healthcare delivery. The resident doctors specialising in surgery should be supervised by the consultant surgeons to guarantee quality health care delivery. As health care providers, efforts should be made to reduce burnout both for the surgeons and their team members to achieve optimal performance of doctors and hence reduce complications and reduce cases of retained foreign objects in the patient's body.

Nurses

Nurses are important healthcare providers. Nurses have a significant part to play in the healthcare delivery generally. The International Council of Nurses' Code of Ethics and Code of Professional Conduct for Nigerian Nurses and Midwifery has categorically listed the four fundamental responsibilities of a nurse as follows: to promote health, to prevent illness, to restore health and to alleviate suffering. Furthermore, it is the duty of a nurse assisting in any medical treatment to respect the human and cultural rights of their patients, which include rights to life; choice of medical treatment, choice of medical professional, right to dignity and right to be treated with respect. The Nursing and Midwifery (Registration, Etc.) Act, which established the Nursing and Midwifery Council of Nigeria (NMCN), in an attempt to promote the safety of patients' states that one of the pre-conditions for establishing a Maternity by a qualified Nurse/Midwife is that there will be prompt access to a practicing obstetrician and gynaecologist or an experienced medical practitioner at all times. 18

⁵ < https://www.reliasmedia.com/articles/21394-who-are-health-care-personnel> accessed 21 March 2024

⁶ BRIDG Model Dictionary Biomedical Research Integrated Domain Group, 2019

⁷ NHA s 64

⁸KS Meier, Duties & Responsibilities of a Surgeon in the Operating Room, https://work.chron.com/duties-responsibilities-surgeon-operating-room-24301.html accessed 17 December 2019

⁹ Career Planner, 'Surgeon Job Description' https://job-descriptions.careerplanner.com/Surgeons.cfm accessed 13 January 2020.

 $^{^{10}}$ Ibid.

¹¹ *Ibid*.

¹² Ibid.

 ¹³ Ibid 3.
 14 M Zarenezha and others, 'Three Years Evaluation of Retained Foreign Bodies After Surgery in Iran' [2017] (15)
 Annals of Medicine and Surgery Journal 22.

¹⁵ 1963, 2012.

¹⁶ P Sunbola, 'Nursing Ethics and Principles: A Millieu in Connecting 21st Century Norms And Culture' [24 August 2017] http://www.nursingworldnigeria.com/2017/08/nursing-ethics-and-principles-a-millieu-in-connecting-21st-century-norms-and-culture-by-nurse-sunbola-paul accessed 21 April 2023.

¹⁷ Cap. N143, Laws of the Federation of Nigeria, 2004.

¹⁸ Nursing and Midwifery (Registration, etc.) Act, s 23 (2) (c).

The NMCN¹⁹ as a regulatory body, supported by the National Association of Nigeria Nurses and Midwives (NANNM), has the responsibility of ensuring that quality healthcare delivery is guaranteed in Nigeria.²⁰ The circulating Nurse is the patient's advocate and protector during surgery. ²¹It is, therefore, his/her duty to ensure that all equipment and machines are in order, and certify the patient's readiness for the surgery; he/she is a problem solver, safety monitor, observes the surgery and ensures that all aspects of the patient safety guidelines are adhered to.²² He/she choreographs the actions of the surgeon, the anaesthetist, and the scrub personnel.²³ The nurse should ensure that the surgical safety checklist²⁴ is meticulously adhered to in line with all acts obtainable before induction of anaesthesia, before skin incision and before the patient leaves the operating room.²⁵ Generally, as a stakeholder in patient safety advocacy, the nurse ensures that the operating room, the patient and the surgical team are ready for the procedure.

Physician Anesthesiologist/Nurse Anesthetists

An anesthesiologist is a health care provider, whose roles include the administration of anaesthetics on the patient in the operating room before the surgery;²⁶ monitoring and control of the patient's vital signs during surgery including heart rate and rhythm, breathing, blood pressure, body temperature and body fluid balance (IV);²⁷ and control the patient's pain and level of consciousness to make conditions ideal for a safe and successful surgery.²⁸ Physician anesthesiologists or nurse anaesthetists are irreplaceable healthcare personnel when it comes to surgical procedures.

Pharmacists

Pharmacists are healthcare professionals whose areas of speciality are principally in the preparation, dispensing, and management of medications. As a stakeholder in health care, he/she provides pharmaceutical advice and guidance on the right way to use, store, preserve, and provide medicine.²⁹ Pharmacists specialize in the administration of medicines to patients and disclosure of the potential side effects of the medicine to the patient. They also engage in research and testing of new medicines. Pharmacists work in various health establishments, such as Universities, government institutions, medical clinics, hospitals and pharmacies.

4. Rights of Healthcare Providers

Statutory Rights under the National Health Act 2014

Right of Safety

It is the right of the physician or other allied medical professional during his work and within the course of his/her employment to be protected against any injury or damage to his/her person and property by the Health Care Establishment (HCE).³⁰ The HCE owes the healthcare provider, health officer or employees of the healthcare establishment this duty of care to ensure that the work environment is devoid of any material that may cause harm to the health provider in the course of his/her duty. Failure of the employer to ensure that physicians and other allied medical professionals are protected may give rise to an action in contract against the HCE. The Employee's Compensation Act in the bid to protect the health care providers provided in section 7(1) that 'Any employee, whether or not in a workplace, who suffers any disabling injury arising out of or in the course of employment shall be entitled to payment of compensation by Part IV of this Act.'³¹ This means that any injury which includes bodily injury or disease resulting from an accident or exposure to critical agents and conditions in a workplace needed compensation on the part of the health care provider.³² From the preceding, it has been observed, that most healthcare personnel involved in some of the above-described injuries,

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¹⁹Nursing and Medical Council of Nigeria, 'Functions' https://www.nmcn.gov.ng/function.html#:~:text = Conduct%20and% 20Promote% 20Research% 20in, Midwifery% 20in% 20all% 20its% 20ramifications.> accessed 21 April 2024.

²⁰ National Association of Nigeria Nurses and Midwives (NANNM) https://businesses.connectnigeria.com/view_details/national-association-of-nigeria-nurses-and-midwives-nannm-50302.html accessed 27 May 2020.

²¹ KS Meier, 'What Are the Responsibilities of Circulating Nurses?' [29 June 2018] https://work.chron.com/ responsibilities-circulating-nurses-15643.html> accessed 16 April 2024.

²³ K Poulsen, 'What Do Circulating Nurses Do?' [20 March 2020]https://toughnickel.com/industries/Operating-Room-Nursing-Circulator> accessed 13 November, 2023.

WHO, 'Why Safe Surgery is Important' https://www.who.int/patientsafety/safesurgery/checklist/en/ accessed 12 January 2024.
 World Alliance for Patient Safety, 'WHO surgical safety checklist and implementation manual' https://www.who.int/patientsafety/safesurgery/checklist/en/ accessed 12 January 2024.

who.int/patientsafety/safesurgery/tools_resources/SSSL_Checklist_finalJun08.pdf> accessed 12 July 2019.

²⁶ Chronicle Contributor, 'The Duties of the Anesthesiologist during Surgery' [19 June 2020] https://work.chron.com/duties-anesthesiologist-during-surgery-22646.html accessed 23 April 2021.

²⁷ Texas Society of Anesthesiologists, 'The Role of the Anesthesiologist-from Surgical Anesthesia to Critical Care Medicine and Pain Medicine' https://www.tsa.org/public/anesthesiologist_role.php accessed 23 July 2019.

²⁸ *Ibid*.

²⁹ Z Sheikh, 'What Is a Pharmacist?' [November 22, 2023] https://www.webmd.com/a-to-z-guides/what-is-pharmacist accessed 25 March 2024

³⁰ NHA 2014, s 21 (2) (a).

³¹ Employee Compensation Act (ECA) 2010 s7 (1)

³² ECA s73

accidents or diseases which could be in the form of iatrogenic events or hospital-acquired infections may not have sought compensation from the Health Establishments, due to lack knowledge or awareness of such rights.

Right of Protection against Disease Transmission

It is the right of physicians and other allied health professionals to be protected by the healthcare establishment against diseases while under its employment and in the course of their duty to the employer.³³ An instance of this is a situation where the physician is to attend to a patient with a communicable disease like HIV, Tuberculosis, Ebola, COVID-19 (coronavirus disease), etc. It is the responsibility of the healthcare establishment where such patients are treated to provide the physicians and allied medical professionals with all the necessary protective equipment so as not to contact such a disease from the patients or other iatrogenic infections. In Dodson v. Regency IHS of West Oaks,34 the employer has sued for the death of Maurice Dodson a certified nurse in West Oaks Nursing and Rehabilitation Center in Austin Texas, who died of Covid-19 for non-provision of Personal Protective Equipment (PPE) to his employees.

Right of Refusal to Treat a Patient

The physician has the right to decline treatment of a patient who is physically or verbally abusive or who sexually abuses him or her. Whenever a physician declines treatment for a patient, the appropriate authority should be put on notice. 35 The appropriate authority in this circumstance is the healthcare establishment or the Chief Medical Officer of the particular hospital. The only exception to this right is in the case of psychiatric patients. This right does not in any way contradict the patient's right to treatment. This arises where the actions of the patient are contrary to the ethics of the profession and not morally and legally justified. This scenario where a physician declines treatment of a patient may arise where the patient disregards the physician's medical instructions; where patients leave a hospital against medical advice, or physically assault a member of the medical staff.³⁶ The physician may also deny treatment to a patient where it is obvious that the patient has displayed drug-seeking behaviour and is an addict, the facility cannot manage him/her; a disruptive patient that is difficult to manage, there is no working relationship between the physician and the patient's healthcare insurance provider; where the medical demands of the patient are contrary to the religious belief or convictions of the physician; an instance of the above is where the patient demands a procedure for an abortion from a doctor whose faith and personal convictions are against abortion; and where the patient or the patient's spouse is a medical malpractice lawyer, the physician may be afraid of legal malpractice claims³⁷ There is however exemption to this right of the Physician, which states that the physician cannot decline treatment on the grounds of discrimination against the patient due to his gender, colour, financial status, religion, place of origin, and political affiliation³⁸

Right of the Physician to be Indemnified by the Employer

It is the right of the physician to be indemnified by the employer for all the expenses incurred during the court proceedings, where the court found him/her not guilty of negligence.³⁹ This is simply because most actions in negligence would always join the health establishment as a defendant, even when the negligence is committed by the physician. Since the healthcare establishment is the employer and the negligent act happened in the course of his/her duty as his/her employee, the facility is vicariously liable because the principal-agent relationship exists. Hence, if the judgment is in favour of the defendants, it is the right of the physician to be indemnified by his employer or health establishment.

Ethical Rights of Health Care Givers

Right of Exclusive Medical Practice

The Code of Medical Ethics in Nigeria 2008 provides that medical and dental practice in Nigeria is an exclusive preserve to only persons who have undergone training based on the curriculum for medical and dental education as approved by the Medical and Dental Council of Nigeria and have obtained the certificates approved or recognised by the Council, who besides all these have been registered and licensed by the Council.⁴⁰

³³ NHA 2014, s 21 (2) (b).

³⁴ A Morris, 'Texas Lawsuit against Nursing Home over Worker's COVID-19 Death Could Point to Trend in Litigation' (14 May accessed 10 April 2024. ³⁵ NHA 2014, s 21 (3).

³⁶Samuel D. Hodge, 'Must A Physician Treat A Disruptive Or Abusive Patient Or can The Doctor Fire That Person?', (2) (1) DePaul J. Health Care L. (2019), page

³⁷ B K Neiman, 'Reasons Why a Doctor Can Deny a Prospective Patient Treatment' https://www.baizlaw.com/can-doctor-deny- treatment-options/> accessed 23 March, 2024.

Universal Declaration of Human Rights, art 7 https://www.un.org/en/about-us/universal-declaration-of-human-rights rights#:~:text=Article%207,any%20incitement%20to%20such%20discrimination> accessed 24 February 2024; 199 Constitution of the Federal republic of Nigeria, s 42

³⁹ NHA 2014, s 22.

⁴⁰ CME 2008, r 12 (1).

Right to Give a Standing Order

It is the right of the Physician when unavailable to give a standing Order and it will be executed by a member of his/her medical team. It standing Order may be defined as 'an order for some form of treatment, medication, or procedure to be carried out by a nurse in the absence of a doctor. To be valid, it must be written, signed by a doctor, and applicable to a specific patient or situation. It use of a Standing Order provides a clear guideline that will suffice as an authority to treat the patient by the appropriate members of the health team. Any action taken outside the Standing Order is illegal and renders such other professionals or technicians liable. Such standing Order must be prepared in the first instance by supervising doctors, the institutions or the corporate medical profession.

Right to Withdraw Services

It is unethical for a physician to withdraw from treating his/her patient without a good reason. This right of withdrawal from treatment of a patient can only be available to the physician, on grounds of honour or self-respect; or where the patient insists on an unjust or immoral process of his treatment; or he/she deliberately disregards his agreement or obligations as to the fees or expenses. Notwithstanding the circumstances, the best interest of the patient is always paramount before this right is invoked, hence adequate notice should be given to the patient on time to make an alternative arrangement for the management of his/her sickness. Ad Another instance that may justify the physician's withdrawal from the treatment of a patient is industrial action or strike, in pursuit of rights under the Labour Law of the Federal Republic of Nigeria. However, the caveat is that a physician embarking on strike must make a satisfactory arrangement for the continuing care of his patients and must have put the patient and the hospital authorities on notice of his intention. The physician should also ensure that no life is lost by his withdrawal and refund unearned money to the patient.

Right to Conscientious Exemption

Physicians have the right to exempt themselves from participation in a medical procedure that offends their faith, or cultural belief and is unlawful.⁴⁶ The right of quick referral to another medical facility is also available to the physician when he/she is unable to treat a patient due to the non-availability of certain facilities, instruments, medicines, staff etc.⁴⁷

5. Challenges of Applying Healthcare Providers' Rights in Nigeria

Lack of Awareness

Generally, most healthcare providers are not aware of their rights provided by the National Health Act. ⁴⁸ A lack of awareness of such rights has led to healthcare provider's inability to enforce such rights.

Fear of Summary Dismissal by the Employer

Most health establishments often threaten healthcare providers under their employment with dismissal should they take legal action against them, and this has resulted in the abandonment of claims by the victims of rights violations against their employers. This fear is worsened by the lack of job opportunities in Nigeria and the intimidation being unleashed on the employees by their employers in Nigeria. The uncertainties about getting a new job opportunity would make the victim of right violation unwillingly but for fear of loss of job abandon his/her claims. The Common Law labour principle that the employer has the right to hire and fire made it more difficult for healthcare personnel to vigorously pursue their rights, especially when violated.

Lack of Funds to Access Justice

To seek redress in court has a lot of demands, especially, financial commitments. Oftentimes, the Health provider who is an employee of the health establishment may find it financially difficult to engage his employer in a legal battle in Nigerian courts. As an employee, the challenge is that engaging his boos in a court of law for violation of his right will have much impact on the meagre resources that he receives as a salary.

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⁴¹ CME 2008, r 12(3).

⁴² R Irving and others, 'Functions of Standing Orders for the Nurses in Industry' in *Liberty Mutual Insurance Company, New York*, (37) 1431. (A paper presented before the Industrial Hygiene Section of the American Public Health Association at the Seventy-fourth Annual Meeting in Cleveland, Ohio, November 13, 1946).

⁴³ CME 2008, r 12(3).

⁴⁴ CME 2008, r 45.

⁴⁵ CME 2008, r 45 (1).

 ⁴⁶ OA Osanyin, 'The Doctor's Rights vs. the Patient's Rights' Being a paper presented at the 58th Annual Conference of the American College of Legal Medicine (ACLM) at the Millennium Biltmore Los Angeles California on 25th February 2018.
 http://loyalnigerianlawyer.com/the-doctors-rights-vs-the-patients-rights-/> assessed 15 March 2020.
 47 Ibid.

⁴⁸ NHA ss 21 & 22

Corruption in the Nigerian Judiciary

It is a fact that most health providers are ignorant of their rights. A few HCPs who are aware of their rights may find it frustrating when they attempt to take action against their employee for violating their rights. The delay in prosecuting a matter in Nigerian courts and the compromising nature of judges and Judges' Staff has left much to be desired.

The Dilemma of Instituting a Legal Action against the Employer by the Healthcare Providers

When the right of the health provider is violated, the first thing that comes to the mind of the health care provider is how it would look in the eyes of the public that the victim of rights violation has instituted action against his employer. This dilemma may hinder health providers from enforcing their legal and ethical rights against their employer.

Lack of Political Will by the Government to Implement the Laws

These rights of the health providers are already in the National Health Act, but to ensure the effective implementation of such laws lies within the competence of the government. The state has the apparatus for the enforcement of laws made by the Legislature. Laws are made but they end on the paper, adequate implementations and follow-up through the policy making are left unattended to.

6. Conclusion and Recommendations

It is found that the healthcare providers' rights have not been adequately addressed and that Sections 21 and 22 of the NHA have not optimally been invoked by the healthcare providers when their rights are violated by the health establishments that offered them employment. It is also observed that most HCPs are ignorant of their rights as provided in the National Health Act and the Employee's Compensation Act, and that has led to the poor enforcement of their rights. The writer has robustly discussed both the ethical and legal rights of the health care providers, which if the Health Care Providers become aware of such rights will lead to sufficient enforcement of such rights. Once the healthcare providers are abreast with their rights and begin to enforce their rights against their employers, the violations will be reduced by the health establishments. In the light of the above challenges, the following measures may be useful:

Special Enactment on Healthcare Providers Rights

The National Assembly should enact specific legislation on the protection of Health care givers rights and ensure they are adequately enforced. Allotting only two sections⁴⁹ in the National Health Act to the rights of health care providers is not exhaustive and does not adequately provide for all the rights of the Health care providers. Under item 60(a), the legislators are authorized 'to enforce the observance of the Fundamental Objectives and Directive Principles contained in this Constitution.' ⁵⁰ Sequel to the constitutional authority given to the legislators, they can enact new detailed legislation on the rights of the health care providers.

Integrate the Rights of Health Care Providers in the Medical Schools Curriculum

Health care provider's rights should be made part of the curriculum for medical schools, residency training of doctors and other allied health care personnel. It is therefore imperative that healthcare providers' rights should be introduced as a discipline in the academic health institutions and Law Faculties in Nigeria. This will assist the medical providers to be acquainted with their rights under the National Health Act and that will help them to enforce such rights when breached by the health establishments.

Medico-legal Education on the Rights of Health Care Providers

Education of health care providers on their ethical and legal rights through enlightenment campaigns will expose the health care providers to their rights in health establishments and that will motivate them to vigorously protect such rights. In times of breach, the Employee's Compensation Act should be invoked.

Advocacy on Health Care Providers' Rights

A vigorous advocacy on protecting the healthcare providers' rights and the enforceability of such rights in Nigeria's healthcare delivery should be embarked upon by the Agencies of the Government, Civil Society Organizations (CSOs) and Non-Governmental Organizations (NGOs). Government Agencies like the National Orientation Agency, Human Rights Commission, Federal Competition and Consumer Protection Commission, Executive Arm of the government and Judiciary are necessary stakeholders in the campaign for the protection of health Providers' rights.

Health Establishments should Respect the Extant Laws on the Healthcare Provider's Rights

Health Establishments should be more enlightened on the rights of the health care providers who are often their employees. The rights of the Health care providers should be respected by the health establishments.

Pro-Bono Legal Representations

Health Care Providers who cannot afford to pay for legal services to enforce their rights can approach the Legal Aid Counsel for assistance and enforcement of their rights.⁵¹ This is to ensure that nobody is denied justice when his/her rights are breached. Hence, all healthcare personnel should utilise the opportunity to get justice.

⁴⁹ NHA s 22 and 23

⁵⁰ CFRN 1999, Second Schedule, Legislative Powers, Exclusive Legislative list, Part.1.

⁵¹ Legal Aid Act 2011 s 8 (3)