

**Reconstruction of Legal Protection for Nurses in the Provision of
Hospital Nursing Care Based on Restorative Justice**

Endro Haksara^{1*}, Shohibul Hilmi², Elyani³, Jaka Kusnanta⁴, Henning Glaser⁵

¹Stikes Kesdam IV/Diponegoro Semarang, Indonesia

^{2,3,4}Universitas Sultan Agung Semarang, Indonesia

⁵Universitas Thammasat Bangkok, Thailand

Email: ehaksara@gmail.com*

DOI: 10.5281/zenodo.18357611

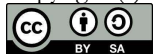
*Corresponding Author

|| *Received: 16-07-2025* || *Revised: 28-10-2025* || *Accepted: 18-12-2025* || *Published On: 31-12-2025*

Abstract: Nurses play a central role in the delivery of healthcare services in hospitals, yet they remain vulnerable to legal risks arising from nursing practices, including allegations of malpractice and professional misconduct. Existing legal protections for nurses tend to emphasise punitive and procedural approaches, often neglecting principles of fairness, proportionality, and relational justice. This study aims to reconstruct the legal protection framework for nurses in the provision of hospital nursing care, grounded in the restorative justice approach. Employing a normative juridical research method, this study analyses statutory regulations, professional standards, court decisions, and relevant legal doctrines concerning nursing practice and health services. The findings reveal that current regulatory frameworks inadequately accommodate restorative mechanisms, resulting in legal uncertainty and psychological vulnerability for nurses during professional practice. This study proposes a restorative justice-based regulatory reconstruction that prioritises dialogue, accountability, victim recovery, and professional rehabilitation while maintaining patient safety and public trust. The reconstruction model emphasises mediation, proportional responsibility, and institutional support mechanisms as integral components of legal protection for nurses. This study contributes academically by offering a conceptual and normative framework for integrating restorative justice into nursing law and, practically, by providing policy recommendations for more humane, balanced, and sustainable legal protection in hospital nursing care.

Keywords: Hospital Nursing Care; Legal Protection; Nurses; Regulatory Reconstruction; Restorative Justice.

Copyright (c) 2025 Endro Haksara et al.



This work is licensed under a Creative Commons Attribution-ShareAlike 4.0 International License

Abstrak: Perawat memegang peran sentral dalam penyelenggaraan pelayanan kesehatan di rumah sakit, namun mereka tetap rentan terhadap risiko hukum yang timbul dari praktik keperawatan, termasuk tuduhan malpraktik dan pelanggaran profesional. Regulasi perlindungan hukum bagi perawat yang berlaku saat ini cenderung menekankan pendekatan yang bersifat represif dan prosedural, sehingga sering kali mengabaikan prinsip keadilan, proporsionalitas, dan keadilan relasional. Penelitian ini bertujuan untuk merekonstruksi kerangka perlindungan hukum bagi perawat dalam penyelenggaraan asuhan keperawatan di rumah sakit berbasis pendekatan keadilan restoratif. Penelitian ini menggunakan metode penelitian yuridis normatif dengan menganalisis peraturan perundang-undangan, standar profesi, putusan pengadilan, serta doktrin hukum yang relevan terkait praktik keperawatan dan pelayanan kesehatan. Hasil penelitian menunjukkan bahwa kerangka regulasi yang ada belum secara memadai mengakomodasi mekanisme restoratif, sehingga menimbulkan ketidakpastian hukum dan kerentanan psikologis bagi perawat dalam menjalankan praktik profesionalnya. Penelitian ini mengusulkan rekonstruksi regulasi berbasis keadilan restoratif yang mengedepankan dialog, pertanggungjawaban, pemulihan korban, dan rehabilitasi profesional, dengan tetap menjaga keselamatan pasien serta kepercayaan publik. Model rekonstruksi tersebut menekankan mediasi, tanggung jawab yang proporsional, serta mekanisme dukungan institusional sebagai bagian integral dari perlindungan hukum bagi perawat. Secara akademik, penelitian ini memberikan kontribusi berupa kerangka konseptual dan normatif untuk mengintegrasikan keadilan restoratif dalam hukum keperawatan, serta secara praktis menawarkan rekomendasi kebijakan guna mewujudkan perlindungan hukum yang lebih humanis, berimbang, dan berkelanjutan dalam asuhan keperawatan di rumah sakit.

Kata kunci: Asuhan Keperawatan di Rumah Sakit; Keadilan Restoratif; Perawat; Perlindungan Hukum; Rekonstruksi Regulasi.

Introduction

Nurses are among the health workers who play a strategic role in the health service system, especially in hospitals. They are not only responsible for providing direct nursing care to patients but also act as liaisons between patients, doctors, and healthcare institutions. The complexity of the task puts nurses in a vulnerable position, subject to a variety of risks, including legal risks arising from the implementation of nursing practices. In practice, nurses often face lawsuits, allegations of malpractice, and reports of professional misconduct, both caused by procedural errors, limited facilities, work pressure, and systemic factors in the implementation of hospital health services.¹

Although nursing is regulated by various laws, regulations, and professional standards, legal protection for nurses in practice still leaves many problems. Existing

¹ Ichlas Tribakti, Edy Wijayanti, and Yusak Andri Ende Putra, 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya', *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149, <https://doi.org/10.59585/bajik.v3i1.507>.

legal frameworks tend to position nurses as blameless subjects in medical disputes or conflicts between healthcare workers and patients. The dominant legal approach is repressive, procedural, and criminal-oriented, and therefore does not consider the relational context between nurses and patients or the institutional dynamics of hospitals. As a result, the law enforcement process not only creates legal uncertainty but also causes psychological distress, decreased professionalism, and insecurity among nurses in carrying out their duties.²

On the other hand, the restorative justice paradigm is increasingly developing as an alternative approach to resolving legal disputes, including in the health sector. Restorative justice emphasises the restoration of relationships, dialogue between parties, proportionate responsibility, and the recovery of victims' losses, rather than just the imposition of sanctions. This approach is considered more humanistic and contextual, especially in cases involving professional relationships and public trust, such as in hospital nursing practice. However, the integration of the principle of restorative justice into the regulation of legal protection for nurses is still relatively limited and has not become mainstream in the formation of health law policies.³

Several previous studies have examined legal protections for nurses from various perspectives. The first research focuses on the normative analysis of nursing laws and regulations, with particular attention to nurses' rights and obligations in health service practice.⁴ The study concludes that existing regulations have provided a normative basis for legal protection, but their implementation remains weak due to inadequate and inequitable protection mechanisms. This research contributes to mapping a positive legal framework, but it has not addressed alternative approaches to nursing conflict resolution.

The second study examines the legal protection of nurses in cases of alleged malpractice, using both litigation and non-litigation approaches.⁵ The study highlights

² A. A. Gde Bagus Yoga Swastika Putera and I. Ketut Suardita, 'Perlindungan Hukum Terhadap Perawat Sebagai Tenaga Kesehatan Dalam Konteks Hukum Administrasi Negara', *Kertha Desa: Journal Ilmu Hukum* 13, no. 11 (October 2025): 1147–57.

³ Yeni Triana et al., 'Perlindungan Hukum Terhadap Perawat Pada Rumah Sakit Berdasarkan Undang-Undang Nomor 38 Tahun 2014 Tentang Keperawatan', *Jurnal Pendidikan Dan Konseling (JPDK)* 5, no. 2 (March 2023): 1938–1947, <https://doi.org/10.31004/jpdk.v5i2.13280>.

⁴ Yulianti Wulandari and Faisal Satiago, 'The Use of Mediation to Resolve Dispute on Health Services as a Legal Protection for Nurse', paper presented at Proceedings of the 1st International Conference on Law, Social Science, Economics, and Education, ICLSSEE 2021, March 6th 2021, Jakarta, Indonesia, 5 May 2021, https://eudl.eu/doi/10.4108/cai.6-3-2021.2306383?utm_source=chatgpt.com.

⁵ Yeni Vitrianingsih et al., 'Doctors' Legal Protection of Midwives And Nurses Professionals In Medical Actions In Hospitals', *YURISDIKSI: Jurnal Wacana Hukum Dan Sains* 19, no. 3 (December 2023): 423–432, <https://doi.org/10.55173/yurisdiksi.v19i3.212>.

the importance of mediation and out-of-court dispute resolution to reduce the psychological and administrative burden on nurses. Nevertheless, the study still views non-litigation mechanisms as a technical option for dispute resolution, without conceptually linking them to the restorative justice paradigm and without offering systemic regulatory reconstruction.

Meanwhile, the third study examined the application of restorative justice in the health sector, with a focus on medical disputes.⁶ This study shows that restorative justice can improve public trust and the quality of health services through a dialogical approach. However, the study has not specifically positioned nurses as the primary focus of the analysis, nor has it examined the need for legal protection of the nursing profession within the context of hospital regulations.

Based on the three previous studies, there is a significant research gap. First, there has been no study that explicitly provides legal protections for nurses by making restorative justice the primary framework. Second, the restorative justice approach in nursing remains normative-conceptual and has not been fully integrated into the design of operational legal protection. Third, there is a lack of studies that link the legal protection of nurses with aspects of victim recovery, professional rehabilitation, and proportionate institutional responsibility of hospitals. Departing from this gap, this research offers novelty in three main aspects. First, this study not only examines the legal protection of nurses normatively, but also reconstructs the regulatory framework by systematically integrating the principles of restorative justice. Second, this study places nurses as a central subject in the health legal system, taking into account the professional, psychological, and institutional dimensions in nursing practice. Third, this study proposes a legal protection model that balances the interests of nurses, patients, and hospitals through mechanisms of dialogue, mediation, and proportional responsibility.

Thus, this research focuses on answering one main research question: how can legal protection regulations for nurses be reconstructed to support the implementation of nursing care in hospitals grounded in restorative justice? This question serves as the basis for analysing existing regulatory weaknesses and formulating a fairer, more sustainable legal protection model. The significance of this research is theoretical and practical. Theoretically, this research contributes to the development of health law and nursing law by expanding the perspective on legal protection through the integration of restorative justice. This research also enriches academic discourse on the transformation of the law enforcement paradigm from a retributive approach to a restorative approach in the context of health services. In practice, the results of this study are expected to serve as a reference for policymakers, hospital institutions, and nursing professional

⁶ Hildayastie Hafizah and Surastini Fitriasih, 'Urgensi Penyelesaian Dugaan Kesalahan Medis Melalui Restorative Justice', *JURNAL USM LAW REVIEW* 5, no. 1 (April 2022): 205–223, <https://doi.org/10.26623/julr.v5i1.4884>.

organisations in formulating regulations and legal protection mechanisms that are more humane, fair, and recovery-oriented. Thus, legal protection for nurses not only serves as an instrument of control but also as a means of professional empowerment and the improvement of the quality of hospital health services.

Method

This research uses normative juridical research methods with conceptual approaches and laws and regulations. The research focuses on the analysis of legal norms governing legal protection for nurses in the implementation of nursing care in hospitals, as well as their integration with the principles of restorative justice. The data used in this study consists of primary and secondary legal materials. Primary legal materials include laws and regulations related to nursing and health services, relevant court decisions, and hospital institutional policies. Secondary legal materials include scientific literature, previous research results, law and health journals, and the doctrines of experts who discuss the legal protection of health workers and restorative justice. Data collection is carried out through literature reviews and the systematic tracing and inventory of legal materials.⁷

Data analysis is carried out in a normative, qualitative manner through the stages of legal interpretation, argument construction, and the reconstruction of legal norms. Data were analysed by examining the conformity between applicable regulations and the principles of restorative justice, and identifying normative weaknesses and their practical implications for the legal protection of nurses. The results of the analysis are then used to formulate a fairer, proportionate, and recovery-oriented regulatory reconstruction model. Data validation is carried out through triangulation of sources and theories by comparing various legal materials and conceptual perspectives to ensure the consistency, relevance, and accuracy of the legal arguments constructed. This approach is expected to yield findings that can be accounted for academically and practically in the development of legal protection policies for nurses based on restorative justice.

Results and Discussion

Existing Legal Protection Framework for Nurses in Hospital Nursing Care

The analysis of the applicable regulatory framework shows that legal protection for nurses in the delivery of nursing care in hospitals is provided through various legal instruments, including laws, derivative regulations, and professional standards. Normatively, the regulation affirms nurses' right to legal protection while practising in accordance with professional, service, and nursing codes of ethics. However, the study's

⁷ Matthew B Miles and A. Michael Huberman, *Analisis Data Kualitatif: Buku Sumber Tentang Metode-Metode Baru* (Jakarta: Universitas Indonesia Press, 2014).

findings indicate that the existence of these legal norms does not fully guarantee nurses a sense of security and legal certainty in their daily professional practice. In practice, nurses are often in a weak position when there is a conflict or dispute between patients and healthcare workers. Several factors, including the professional hierarchy in the health service system, limited clinical decision-making authority, and reliance on hospital institutional policies, contribute to this subordinate position. As a result, when there are allegations of errors or negligence in service, nurses are often the first held accountable, even though these problems are often systemic and involve multiple institutional actors.⁸

The legal approach to nursing dispute resolution remains dominated by the retributive and procedural paradigms. The law enforcement process focuses more on proving mistakes and imposing sanctions, both through criminal, civil, and administrative mechanisms. This approach often ignores the relational aspect between nurses and patients, and rules out the need for psychological and professional recovery for nurses. These findings align with criticisms in the health law literature that repressive approaches tend to worsen therapeutic relationships and degrade the quality of health services.⁹

Furthermore, the study's results show a misalignment between legal norms and their implementation at the hospital level. Many hospitals do not yet have precise internal mechanisms for providing legal assistance, psychological support, or non-litigation conflict resolution for nurses. This condition causes nurses to face legal risks individually, without adequate institutional support.¹⁰ Thus, although normatively legal protection has been regulated, substantively, the framework has not been fully effective in addressing the needs for legal protection of nurses in the field.

Limitations of the Retributive Approach in Resolving Nursing Practice Disputes

Further analysis shows that the dominance of the retributive approach in the dispute resolution of nursing practices poses various limitations. This approach departs from the assumption that any conflict or error in service must be resolved through a punitive mechanism, with the primary goal of deterring and enforcing legal certainty.

⁸ Retno Adhilla Putri and Yussy Adelina Mannas, 'Perlindungan Hukum Terhadap Perawat Dalam Pelaksanaan Pelimpahan Wewenang Pelayanan Kesehatan Berdasarkan Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan: Studi Pada Rumah Sakit TK III Dr. Reksodiwiryo Padang', *UNES Law Review* 7, no. 3 (March 2025): 1108–1121, <https://doi.org/10.31933/unesrev.v7i3.2379>.

⁹ Ichlas Tribakti, Edy Wijayanti, and Yusak Andri Ende Putra, 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya', *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149, <https://doi.org/10.59585/bajik.v3i1.507>.

¹⁰ R. H. Riasari, 'Perlindungan Hukum terhadap Perawat pada Rumah Sakit Berdasarkan Undang-Undang Nomor 38 Tahun 2014 tentang Keperawatan', *Jurnal Hukum Lex Generalis* 2, no. 10 (October 2021): 946–960, <https://doi.org/10.56370/jhlg.v2i10.79>.

However, in the context of complex, high-risk healthcare services, this approach is often out of step with the realities of nursing practice.¹¹

One of the main limitations of the retributive approach is its inability to distinguish proportionately between individual errors and system failures. In many cases, errors in nursing care are not solely due to nurses' negligence but also to structural factors such as excessive workload, limited facilities, inadequate hospital policies, and a lack of coordination between professions. The retributive approach tends to ignore the context and focus accountability on the individual caregiver.¹²

In addition, the retributive approach has a significant psychological impact on nurses. Lengthy legal processes, professional stigma, and the threat of criminal or administrative sanctions can create psychological pressure, anxiety, and fear in carrying out nursing practice. The research findings suggest that this condition may encourage defensive practices, in which nurses focus more on self-protection than on the quality of nursing care. This defensive practice can ultimately harm patients and reduce the overall quality of health services.¹³

The retributive approach also provides less space for the restoration of the relationship between nurses and patients. In the context of health services, a trust-based therapeutic relationship is a fundamental element. Dispute resolution through litigation mechanisms often deepens conflicts, strengthens antagonistic positions, and closes opportunities for constructive dialogue. As a result, the patient's interest in obtaining recovery and clarification is often not optimally met.¹⁴

These findings underscore the need for a paradigm shift in the legal protection of nurses, from a retributive approach to a more restorative, contextual, and recovery-oriented approach. This shift does not mean removing legal accountability, but instead rearranging the accountability mechanism to be more proportionate and fair.

¹¹ Muhammad Irfan and Shinta Andriyani, 'Pengaturan Perlindungan Hukum Yang Berkeadilan Bagi Tenaga Kesehatan Keperawatan Mandiri Di Sarana Pelayanan Kesehatan', *Jurnal Kompilasi Hukum* 10, no. 1 (June 2025): 264–270, <https://doi.org/10.29303/jkh.v10i1.235>.

¹² Edi Krisharyanto and Ratna Winahyu Lestari Dewi, 'Perlindungan Hukum Pasien Dan Tanggung Jawab Hukum Tenaga Kesehatan (Perawat)', *PERSPEKTIF: Kajian Masalah Hukum Dan Pembangunan* 5, no. 2 (2000): 136–146, <https://doi.org/10.30742/perspektif.v5i2.227>.

¹³ Reny Suryanti and Avrilya Iqoranny Susilo, 'Analisis Perlindungan Hukum Bagi Perawat Yang Melakukan Tindakan Medis Dalam Keadaan Darurat Atas Dasar Limpahan Dokter', *Jurnal Media Kesehatan* 16, no. 2 (December 2023): 13–13, <https://doi.org/10.33088/jmk.v16i2.1102>.

¹⁴ Reny Suryanti and Avrilya Iqoranny Susilo, 'Analisis Perlindungan Hukum Bagi Perawat Yang Melakukan Tindakan Medis Dalam Keadaan Darurat Atas Dasar Limpahan Dokter', *Jurnal Media Kesehatan* 16, no. 2 (December 2023): 13–13, <https://doi.org/10.33088/jmk.v16i2.1102>.

Integrating Restorative Justice into Legal Protection for Nurses

The results of the study show that restorative justice has a very significant potential to be integrated into the legal protection framework for nurses in the implementation of nursing care in hospitals. The key principles of restorative justice, such as dialogue, active participation of the parties, recovery of losses, and collective responsibility, are well aligned with the characteristics of health services, which are relational, trust-based, and patient-safety-oriented. In this context, restorative justice is not only understood as an alternative dispute resolution but also as a normative approach that can reorganise relationships among nurses, patients, and health care institutions in a fairer and more balanced manner.¹⁵

The integration of restorative justice into the legal protection of nurses becomes relevant given that nursing practice is essentially a professional practice fraught with risk and uncertainty. Nurses work in situations that demand quick decision-making, often under time pressure, resource constraints, and the complexity of patients' conditions. In such conditions, errors or service imperfections do not necessarily reflect individual negligence but may result from systemic failure. A legal approach that focuses solely on punishing individual nurses risks ignoring this reality and creating new injustices. Therefore, restorative justice offers a more contextual framework by placing wrongdoing in relational and systemic perspectives.¹⁶

In nursing practice, restorative justice can be operationalised through a mediation mechanism involving nurses, patients, patients' families, and hospitals. This restorative mediation aims to create a safe and equal space for dialogue, where each party can convey their perspectives, experiences, and perceived impacts arising from the dispute. For patients, this process provides an opportunity to be heard, get transparent explanations, and get meaningful recovery. Meanwhile, for nurses, mediation allows the delivery of professional context, system limitations, and goodwill in carrying out nursing duties, which are often not accommodated in formal legal processes.¹⁷

¹⁵ Sukindar Sukindar, 'Perlindungan Hukum Terhadap Perawat Dalam Melakukan Tindakan Medis', *LEGALITAS: Jurnal Ilmiah Ilmu Hukum* 2, no. 1 (September 2017): 1–15, <https://doi.org/10.31293/lg.v2i1.2836>.

¹⁶ Dwi Nurul Safitri, 'Implementasi Perlindungan Hukum Terhadap Pasien Pada Pelayanan Kesehatan Oleh Tenaga Medis Berdasarkan Undang-Undang No 36 Tahun 2014 Di Rumah Sakit Tondano', *LEX PRIVATUM* 15, no. 2 (February 2025), <https://ejournal.unsrat.ac.id/v3/index.php/lexprivatum/article/view/60816>.

¹⁷ Indra Yulawan Susilo Adhi Budi, 'Perlindungan Hukum Perawat Praktik Atas Tindakan | Hukumonline', [hukumonline.com](https://jurnal.hukumonline.com/a/5cb4a04f01fb730011dd3a50/perlindungan-hukum-perawat-praktik-atas-tindakan-pelayanan-gawat-dan-darurat-pada-masyarakat-pedesaan-di-desa-susukan-kabupaten-semarang), accessed 23 January 2025, <https://jurnal.hukumonline.com/a/5cb4a04f01fb730011dd3a50/perlindungan-hukum-perawat-praktik-atas-tindakan-pelayanan-gawat-dan-darurat-pada-masyarakat-pedesaan-di-desa-susukan-kabupaten-semarang>.

More than just conflict resolution, restorative justice-based mediation serves as a means of institutional learning.¹⁸ Through dialogue and reflection, hospitals can identify the root causes of disputes, whether procedural, structural, or cultural. This learning serves as the basis for system and operational standard improvements, as well as for the quality of nursing care. Thus, restorative justice not only resolves problems that have occurred but also plays a preventive role in preventing the recurrence of similar mistakes.¹⁹

The research findings also confirm that integrating restorative justice strengthens the legal protection of nurses by fostering fairer recognition of the institutionalisation of hospitals. Within a restorative framework, hospitals are positioned not only as healthcare providers but also as entities responsible for the systems, policies, and work environments that influence nursing practices. Legal responsibility is no longer centred on individual nurses, but is distributed proportionally according to the roles and authority of each actor in the health care system. This approach is in line with the principle of substantive justice that demands a fair and rational sharing of responsibilities.²⁰

Recognition of institutional responsibility also strengthens legal and administrative support for nurses. Within the framework of restorative justice, hospitals are expected to provide legal assistance, psychological support, and transparent, accountable internal mechanisms for handling nursing practice disputes. This support is important to prevent the over-criminalisation of nurses and to create a sense of security in professional practice. This sense of security ultimately contributes to improving the quality of service and patient safety.²¹

In addition to dispute resolution and institutional responsibility, restorative justice also opens space for the professional rehabilitation of nurses. This approach views nurses involved in disputes not solely as wrongdoers, but as professionals who need coaching, reflection, and competency strengthening. Professional rehabilitation can be achieved through various forms, such as retraining, clinical supervision, ethical coaching, or psychological counselling, depending on the nature and impact of the dispute. This approach is more in line with the long-term goal of legal protection, which is to improve

¹⁸ Vincentius Setyawan and Bariah Safrut, 'Rethinking Law and Justice: The Core Principles of Critical Legal Studies against Legal Formalism', *NUSANTARA: Journal Of Law Studies* 4, no. 2 (October 2025): 74–85, <https://doi.org/10.5281/zenodo.17332128>.

¹⁹ Ahmad Akbar Hasibuan and Redyanto Sidi, 'Perlindungan Hukum Bagi Perawat Dalam Menjalankan Tugas Pelayanan Keperawatan Di Rumah Sakit', *Jurnal Ners* 7, no. 1 (April 2023): 3783–83, <https://doi.org/10.31004/jn.v7i1.13301>.

²⁰ Hasibuan and Sidi.

²¹ Ichlas Tribakti, Edy Wijayanti, and Yusak Andri Ende Putra, 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya', *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149, <https://doi.org/10.59585/bajik.v3i1.507>.

the quality of nursing human resources and maintain the sustainability of the health service system.²²

Furthermore, integrating restorative justice into the legal protection of nurses also has important implications for the legal and organisational cultures in hospitals. The restorative approach encourages the creation of a culture of openness, mutual respect, and shared responsibility. In this culture, mistakes are not directly addressed with punishment, but with efforts to understand, correct, and learn together. This cultural transformation is an important foundation for developing a health service system oriented towards patient safety and the welfare of health workers.²³

Thus, integrating restorative justice into legal protections for nurses is not only technical but also paradigmatic. This approach shifts the legal orientation from just law enforcement to the creation of meaningful and sustainable justice. Through dialogue, restorative justice, and collective responsibility, restorative justice offers a legal protection framework that is more humane, contextual, and responsive to the complexities of nursing practice in hospitals. This integration is expected to strengthen nurses' legal protection as professionals, while improving the quality of health services and public trust in the health system as a whole.

Regulatory Reconstruction Model Based on Restorative Justice

Based on the findings and analysis described previously, this study proposes a model for reconstructing legal protection regulations for nurses in the implementation of nursing care in hospitals, grounded in the principle of restorative justice. The reconstruction of this regulation is motivated by the fact that the current legal framework remains oriented towards a retributive and procedural approach. It thus cannot fully provide fair, proportional, and sustainable legal protection for nurses as health workers. The proposed model is not intended to remove the mechanism of legal accountability, but rather to reframe the paradigm, mechanisms, and roles of actors in a more contextually relevant way to the characteristics of nursing practices and the dynamics of hospital health services.²⁴

Regulatory reconstruction begins with affirming restorative justice as a fundamental principle for resolving nursing practice disputes. This principle makes recovery the primary goal of conflict resolution for both patients, as aggrieved parties, and nurses, as

²² A. A. Gde Bagus Yoga Swastika Putera and I. Ketut Suardita, 'Perlindungan Hukum Terhadap Perawat Sebagai Tenaga Kesehatan Dalam Konteks Hukum Administrasi Negara', *Kertha Desa: Journal Ilmu Hukum* 13, no. 11 (October 2025): 1147–1157.

²³ Kastania Lintang, 'Tanggung Jawab Hukum Perawat Praktik Mandiri Terhadap Kerugian Pasien', *Jurnal Suara Hukum* 3, no. 2 (September 2021): 300–326, <https://doi.org/10.26740/jsh.v3n2.p300-326>.

²⁴ Dewi Fibrini, 'Perlindungan Hukum Terhadap Tenaga Kesehatan Dalam Melakukan Tindak Medis', *Iuris Studia: Jurnal Kajian Hukum* 5, no. 1 (July 2024): 147–156, <https://doi.org/10.55357/is.v5i1.621>.

providers of nursing care. In this framework, justice is not solely about sanctioning, but about rebuilding broken relationships, improving service systems, and preventing the recurrence of the same mistakes. Therefore, the principle of restorative justice needs to be explicitly incorporated into the laws and regulations governing nursing and health services, so that it has both normative power and an operational guideline in practice.²⁵

The recognition of restorative justice as a legal principle requires adjustments to the substance of laws, implementing regulations, and internal hospital policies. The reconstructed regulations need to provide a clear space for non-litigation dispute resolution through dialogue, mediation, and other participatory mechanisms. In this context, dispute resolution is no longer understood as a process entirely within the purview of law enforcement officials, but rather as a joint process involving nurses, patients, patients' families, hospital management, and other relevant parties. Thus, regulation not only functions as a control tool but also as an instrument of coaching and recovery.²⁶

As a follow-up to the affirmation of these principles, the regulatory reconstruction model emphasises the importance of establishing an internal mechanism within hospitals to address disputes arising from restorative justice-based nursing practices. This mechanism can be a mediation unit or a restorative justice committee with the authority to facilitate dialogue, clarify the facts, and formulate a remedy agreement between the parties.²⁷ The existence of this internal mechanism aims to prevent the escalation of conflict into litigation and to provide a safe space for nurses to convey their professional perspectives without fear of criminalisation. In addition, this mechanism allows hospitals to conduct systematic evaluations of policies and procedures that may pose legal risks.²⁸

This reconstruction model also underlines the importance of a proportionate distribution of responsibilities in the implementation of nursing care. In the conventional approach, legal responsibilities are often imposed on nurses individually, even though nursing practices are essentially part of a complex healthcare system. The restorative approach proposed in this study assigns responsibility collectively and in stages, in accordance with each actor's role and authority. Hospitals as institutions have

²⁵ Masta Haro, 'Perlindungan Hukum Terhadap Mahasiswa Pendidikan Ners Di Institusi Kesehatan', *Jurnal Skolastik Keperawatan* 2, no. 2 (December 2016): 165–165, <https://doi.org/10.35974/jsk.v2i2.559>.

²⁶ Akhmad Husairi and Lena Hanifah, 'Kesadaran Hukum Perawat Terhadap Keselamatan Pasien Di Rumah Sakit Umum Daerah Pambalah Batung; Pendekatan Sosiolega', *Jurnal Kolaboratif Sains* 8, no. 6 (June 2025): 3035–3044, <https://doi.org/10.56338/jks.v8i6.7758>.

²⁷ Nur Azisa et al., 'Psychological Recovery of Crime Victims within Contemporary Restorative Justice: An Islamic Legal Perspective', *MILRev: Metro Islamic Law Review* 4, no. 2 (September 2025): 1098–1127, <https://doi.org/10.32332/milrev.v4i2.11184>.

²⁸ Raras Merbawani, 'Juridical Analysis Of Nurses' Legal Liability For Negligence In Providing Nursing Services', *Innovative: Journal Of Social Science Research* 4, no. 2 (April 2024): 9291–9298, <https://doi.org/10.31004/innovative.v4i2.11528>.

a responsibility to provide a safe work environment, adequate resources, and policies that support professional nursing practice. Thus, legal protection for nurses cannot be separated from hospitals' institutional responsibility.²⁹

Synergy between actors is a key element in this regulatory reconstruction model. Nurses, patients, hospitals, and professional organisations are positioned as interrelated subjects in a system of restorative justice-based legal protection.³⁰ Nursing professional organisations play a strategic role in maintaining ethical standards, enhancing competence, and supporting nurses involved in disputes. On the other hand, hospitals are responsible for providing legal, psychological, and administrative support, as well as ensuring that dispute-resolution mechanisms operate transparently and fairly. This synergy is expected to create a legal protection ecosystem that does not blame each other but instead strengthens each other.³¹

In addition, the restorative justice-based regulatory reconstruction model also emphasises the importance of professional rehabilitation for nurses. Within this framework, nurses involved in disputes are not only sanctioned but also allowed to reflect, learn, and improve competence.³² Professional rehabilitation can be achieved through retraining, ethical coaching, or psychological mentoring, depending on the level of error and its impact. This approach aligns with the long-term goal of legal protection: improving the quality of nursing services and maintaining patient safety on an ongoing basis.³³

Furthermore, the reconstruction of this regulation also has implications for increasing public trust in health services. Transparent, participatory, and recovery-oriented dispute resolution can strengthen the relationship between health workers and the community.³⁴ Patients not only gain substantive justice but also feel heard and valued in the conflict-resolution process. In the meantime, nurses can practice their profession

²⁹ Merbawani.

³⁰ Hotma P. Sibuea et al., 'Kedudukan Hukum Tenaga Medis Dan Tenaga Kesehatan Perawat Sebagai Pemangku Profesi Kesehatan Dalam Pelayanan Kesehatan', *KRTHA BHAYANGKARA* 17, no. 3 (2023): 567–586, <https://doi.org/10.31599/krtha.v17i3.789>.

³¹ Tata Mahyuvi, 'Perlindungan Hukum Terhadap Perawat Dialisis Dalam Menjalankan Praktik Keperawatan Di Unit Hemodialisa (Studi Di RSUD Ngudi Waluyo Kabupaten Blitar)', *Transparansi Hukum* 4, no. 2 (June 2021), <https://doi.org/10.30737/transparansi.v4i2.1766>.

³² Ichlas Tribakti, Edy Wijayanti, and Yusak Andri Ende Putra, 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya', *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149, <https://doi.org/10.59585/bajik.v3i1.507>.

³³ Mahyuvi, 'Perlindungan Hukum Terhadap Perawat Dialisis Dalam Menjalankan Praktik Keperawatan Di Unit Hemodialisa (Studi Di RSUD Ngudi Waluyo Kabupaten Blitar)'.

³⁴ Dina Puspita, Edy Wijayanti, and Ahmad Jaeni, 'Tanggung Jawab Hukum Perawat Pada Pendokumentasian Asuhan Keperawatan Dalam Rekam Medis Elektronik (RME)', *JURNAL SYNTAX IMPERATIF: Jurnal Ilmu Sosial Dan Pendidikan* 5, no. 5 (November 2024): 1074–82, <https://doi.org/10.36418/syntaximperatif.v5i5.520>.

with a sense of security and confidence, without the shadow of excessive criminalisation.³⁵

Thus, the model of legal protection regulation for restorative justice-based nurses proposed in this study offers a more humanistic, proportional, and sustainability-oriented approach to the health care system. This reconstruction not only addresses the weaknesses of existing regulations but also provides a direction for transforming nursing law towards a paradigm that is more responsive to practical, ethical, and social needs in the implementation of nursing care in hospitals.³⁶ To clarify the differences between conventional and restorative approaches to the legal protection of nurses, the following table presents the results of the analytical synthesis of the research.

Table 1. Comparison of Legal Protection Models for Nurses

Aspects	Conventional (Retributive) Approach	Restorative Approach
Orientation	Punishment and sanctions	Recovery and dialogue
Main subject	Individual nurses	Nurses, patients, and institutions
Mechanism	Litigation and procedural	Mediation and participatory
Psychological impact	Stress and fear	Recovery and rehabilitation
Responsibilities	Individual	Proportional and collective
Final goal	Formal legal certainty	Substantive justice and sustainability

Source: author's interpretation

The table above illustrates the fundamental differences between the legal protection model for nurses that is based on the conventional (retributive) approach and the restorative justice approach. In the conventional approach, the orientation of legal protection places more on punishment and sanctioning in response to alleged wrongdoing in nursing practice. Nurses are positioned as the primary subject of accountability, while relational contexts and institutional factors are often overlooked. The dispute resolution mechanism is dominated by a formal, procedural litigation process, which tends to create psychological pressure, fear, and defensive practices in the implementation of nursing care. The ultimate goal of this approach is more focused on achieving formal legal certainty, without adequately prioritising the restoration of relationships and the sustainability of the quality of health services.

³⁵ Beatrice Anastasya Secillia A et al., 'Analisis Implikasi Undang-Undang No. 17 Tahun 2023 Tentang Kesehatan Terhadap Praktik Keperawatan Di Indonesia', *Jurnal Siti Ruffaidah* 3, no. 2 (May 2025): 38–48, <https://doi.org/10.57214/jasira.v3i2.182>.

³⁶ Shanti Dwi Kartika, 'Urgensi Undang-Undang Tentang Keperawatan (Urgency The Law On Nursing)', *Negara Hukum: Membangun Hukum untuk Keadilan dan Kesejahteraan* 3, no. 1 (August 2016): 133–152, <https://doi.org/10.22212/jnh.v3i1.228>.

In contrast, the restorative justice approach offers a more comprehensive and humanist paradigm of legal protection. In this model, dispute resolution is oriented towards recovery through dialogue and the active participation of all parties involved, i.e., nurses, patients, and hospital institutions. Responsibilities are understood proportionately and collectively, thus not only burdening nurses as individuals, but also considering the role of institutional systems and policies. The psychological impact is rehabilitative, as nurses are encouraged to engage in professional reflection and competence development, while patients gain space for recovery and substantive justice. Thus, the ultimate goal of the restorative approach is not just to enforce the law, but to build sustainable justice, maintain patient safety, and strengthen public trust in hospital nursing services.

Conclusion

This study concludes that the legal protection framework for nurses in hospital nursing care remains dominated by retributive and procedural approaches, thereby failing to fully provide a sense of justice, legal certainty, and balanced professional protection. The results of the study show that existing regulations have not optimally accommodated recovery mechanisms, dialogue, and proportional responsibility between nurses, patients, and hospital institutions. This condition puts nurses in a vulnerable position, subjecting them to legal risks and psychological pressure when carrying out their professional practice. Therefore, this study emphasizes the importance of reconstructing legal protections for nurses by integrating the principle of restorative justice as the primary approach to resolving nursing practice disputes, without neglecting patient safety and professional accountability. As a result, this study recommends strengthening legal and institutional policies to support the implementation of restorative justice in the health care system, especially by establishing mediation mechanisms and providing institutional support at the hospital level. For further research, an empirical study involving nurses, patients, and hospital management is recommended to test the effectiveness of the restorative justice model in practice. In addition, cross-country or cross-legal-system comparative research is needed to enrich perspectives and to formulate a more adaptive, contextual, and sustainable model of nurse legal protection.

Acknowledgments

The author expresses his deepest gratitude and appreciation to the Chairman of STIKES Kesdam IV/Diponegoro Semarang for the support, facilitation, and permission granted to carry out this research. This institutional support makes a significant contribution to the smooth conduct of research, both from an academic and an administrative perspective.

Authors Contribution

Endro Haksara conceptualised the study and led the overall research design. Shohibul Hilmi contributed to the legal analysis and regulatory interpretation. Elyani conducted the literature review and data organisation. Jaka Kusnanta contributed to data analysis and manuscript drafting. Henning Glaser provided critical revisions, methodological refinement, and academic supervision. All authors reviewed and approved the final manuscript.

Conflict of Interest

The author declares that there are no conflicts of interest in the preparation, writing, and publication of this scientific article. This declaration includes the absence of any financial support, funding arrangements, sponsorships, employment relationships, consultancies, honoraria, or other forms of financial interest that could potentially influence the research process or its outcomes. In addition, the author affirms that there are no academic, institutional, or personal relationships or affiliations that may have affected the objectivity, analysis, interpretation, or conclusions of the study. The research was conducted independently, ethically, and objectively, in accordance with accepted academic and professional standards. All data, analyses, and interpretations presented in this article are the result of the author's original scholarly work and are free from external pressure, undue influence, or bias that could compromise the integrity, credibility, or transparency of the research findings.

References

- A, Beatrice Anastasya Secillia, Fransiska Sesilia Maranatha, Natalia Ariela Hartanti, and Yuniarti Yuniarti. 'Analisis Implikasi Undang-Undang No. 17 Tahun 2023 Tentang Kesehatan Terhadap Praktik Keperawatan Di Indonesia'. *Jurnal Siti Ruffaidah* 3, no. 2 (May 2025): 38–48. <https://doi.org/10.57214/jasira.v3i2.182>.
- Azisa, Nur, Audyna Mayasari Muin, M. Aris Munandar, Muhammad Mutawalli Mukhlis, and Aspalella A. Rahman. 'Psychological Recovery of Crime Victims within Contemporary Restorative Justice: An Islamic Legal Perspective'. *MILRev: Metro Islamic Law Review* 4, no. 2 (September 2025): 1098–1127. <https://doi.org/10.32332/milrev.v4i2.11184>.
- Fibrini, Dewi. 'Perlindungan Hukum Terhadap Tenaga Kesehatan Dalam Melakukan Tindak Medis'. *Iuris Studia: Jurnal Kajian Hukum* 5, no. 1 (July 2024): 147–156. <https://doi.org/10.55357/is.v5i1.621>.
- Hafizah, Hildayastie, and Surastini Fitriasih. 'Urgensi Penyelesaian Dugaan Kesalahan Medis Melalui Restorative Justice'. *JURNAL USM LAW REVIEW* 5, no. 1 (April 2022): 205–223. <https://doi.org/10.26623/julr.v5i1.4884>.

<https://doi.org/10.5281/zenodo.18357611>

- Haro, Masta. 'Perlindungan Hukum Terhadap Mahasiswa Pendidikan Ners Di Institusi Kesehatan'. *Jurnal Skolastik Keperawatan* 2, no. 2 (December 2016): 165–165. <https://doi.org/10.35974/jsk.v2i2.559>.
- Hasibuan, Ahmad Akbar, and Redyanto Sidi. 'Perlindungan Hukum Bagi Perawat Dalam Menjalankan Tugas Pelayanan Keperawatan Di Rumah Sakit'. *Jurnal Ners* 7, no. 1 (April 2023): 378–383. <https://doi.org/10.31004/jn.v7i1.13301>.
- Husairi, Akhmad, and Lena Hanifah. 'Kesadaran Hukum Perawat Terhadap Keselamatan Pasien Di Rumah Sakit Umum Daerah Pambalah Batung; Pendekatan Sosiolega'. *Jurnal Kolaboratif Sains* 8, no. 6 (June 2025): 3035–3044. <https://doi.org/10.56338/jks.v8i6.7758>.
- Irfan, Muhammad, and Shinta Andriyani. 'Pengaturan Perlindungan Hukum Yang Berkeadilan Bagi Tenaga Kesehatan Keperawatan Mandiri Di Sarana Pelayanan Kesehatan'. *Jurnal Kompilasi Hukum* 10, no. 1 (June 2025): 264–270. <https://doi.org/10.29303/jkh.v10i1.235>.
- Kartika, Shanti Dwi. 'Urgensi Undang-Undang Tentang Keperawatan (Urgency The Law On Nursing)'. *Negara Hukum: Membangun Hukum untuk Keadilan dan Kesejahteraan* 3, no. 1 (August 2016): 133–152. <https://doi.org/10.22212/jnh.v3i1.228>.
- Krisharyanto, Edi, and Ratna Winahyu Lestari Dewi. 'Perlindungan Hukum Pasien Dan Tanggung Jawab Hukum Tenaga Kesehatan (Perawat)'. *Perspektif: Kajian Masalah Hukum Dan Pembangunan* 5, no. 2 (2000): 136–146. <https://doi.org/10.30742/perspektif.v5i2.227>.
- Lintang, Kastania. 'Tanggung Jawab Hukum Perawat Praktik Mandiri Terhadap Kerugian Pasien'. *Jurnal Suara Hukum* 3, no. 2 (September 2021): 300–326. <https://doi.org/10.26740/jsh.v3n2.p300-326>.
- Mahyuvi, Tata. 'Perlindungan Hukum Terhadap Perawat Dialisis Dalam Menjalankan Praktik Keperawatan Di Unit Hemodialisa (Studi Di RSUD Ngudi Waluyo Kabupaten Blitar)'. *Transparansi Hukum* 4, no. 2 (June 2021). <https://doi.org/10.30737/transparansi.v4i2.1766>.
- Merbawani, Raras. 'Juridical Analysis Of Nurses' Legal Liability For Negligence In Providing Nursing Services'. *Innovative: Journal Of Social Science Research* 4, no. 2 (April 2024): 9291–9298. <https://doi.org/10.31004/innovative.v4i2.11528>.
- Miles, Matthew B, and A. Michael Huberman. *Analisis Data Kualitatif: Buku Sumber Tentang Metode-Metode Baru*. Jakarta: Universitas Indonesia Press, 2014.
- Puspita, Dina, Edy Wijayanti, and Ahmad Jaeni. 'Tanggung Jawab Hukum Perawat Pada Pendokumentasian Asuhan Keperawatan Dalam Rekam Medis Elektronik

<https://doi.org/10.5281/zenodo.18357611>

- (RME)'. *JURNAL SYNTAX IMPERATIF: Jurnal Ilmu Sosial Dan Pendidikan* 5, no. 5 (November 2024): 1074–1082. <https://doi.org/10.36418/syntaximperatif.v5i5.520>.
- Putera, A. A. Gde Bagus Yoga Swastika, and I. Ketut Suardita. 'Perlindungan Hukum Terhadap Perawat Sebagai Tenaga Kesehatan Dalam Konteks Hukum Administrasi Negara'. *Kertha Desa: Journal Ilmu Hukum* 13, no. 11 (October 2025): 1147–1157.
- . 'Perlindungan Hukum Terhadap Perawat Sebagai Tenaga Kesehatan Dalam Konteks Hukum Administrasi Negara'. *Kertha Desa: Journal Ilmu Hukum* 13, no. 11 (October 2025): 1147–1157.
- Putri, Retno Adhilla, and Yussy Adelina Mannas. 'Perlindungan Hukum Terhadap Perawat Dalam Pelaksanaan Pelimpahan Wewenang Pelayanan Kesehatan Berdasarkan Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan: Studi Pada Rumah Sakit TK III Dr. Reksodiwiryono Padang'. *UNES Law Review* 7, no. 3 (March 2025): 1108–1121. <https://doi.org/10.31933/unesrev.v7i3.2379>.
- Riasari, R. H. 'Perlindungan Hukum terhadap Perawat pada Rumah Sakit Berdasarkan Undang-Undang Nomor 38 Tahun 2014 tentang Keperawatan'. *Jurnal Hukum Lex Generalis* 2, no. 10 (October 2021): 946–960. <https://doi.org/10.56370/jhlg.v2i10.79>.
- Safitri, Dwi Nurul. 'Implementasi Perlindungan Hukum Terhadap Pasien Pada Pelayanan Kesehatan Oleh Tenaga Medis Berdasarkan Undang-Undang No 36 Tahun 2014 Di Rumah Sakit Tondano'. *LEX PRIVATUM* 15, no. 2 (February 2025). <https://ejournal.unsrat.ac.id/v3/index.php/lexprivatum/article/view/60816>.
- Setyawan, Vincentius, and Bariah Safrut. 'Rethinking Law and Justice: The Core Principles of Critical Legal Studies against Legal Formalism'. *NUSANTARA: Journal Of Law Studies* 4, no. 2 (October 2025): 74–85. <https://doi.org/10.5281/zenodo.17332128>.
- Sibuea, Hotma P., Dwi Seno Wijanarko, Ali Johardi Wirogioto, Erwin Syahrudin, and Katrina Siagian. 'Kedudukan Hukum Tenaga Medis Dan Tenaga Kesehatan Perawat Sebagai Pemangku Profesi Kesehatan Dalam Pelayanan Kesehatan'. *KRTHA BHAYANGKARA* 17, no. 3 (2023): 567–586. <https://doi.org/10.31599/krtha.v17i3.789>.
- Sukindar, Sukindar. 'Perlindungan Hukum Terhadap Perawat Dalam Melakukan Tindakan Medis'. *LEGALITAS: Jurnal Ilmiah Ilmu Hukum* 2, no. 1 (September 2017): 1–15. <https://doi.org/10.31293/lg.v2i1.2836>.

- Suryanti, Reny, and Avrilya Iqoranny Susilo. 'analisis perlindungan hukum bagi perawat yang melakukan tindakan medis dalam keadaan darurat atas dasar limpahan dokter'. *Jurnal media kesehatan* 16, no. 2 (December 2023): 13–13. <https://doi.org/10.33088/jmk.v16i2.1102>.
- . 'Analisis Perlindungan Hukum Bagi Perawat Yang Melakukan Tindakan Medis Dalam Keadaan Darurat Atas Dasar Limpahan Dokter'. *JURNAL MEDIA KESEHATAN* 16, no. 2 (December 2023): 13–13. <https://doi.org/10.33088/jmk.v16i2.1102>.
- Susilo, Indra Yulawan, Adhi Budi. 'Perlindungan Hukum Perawat Praktik Atas Tindakan | Hukumonline'. hukumonline.com. Accessed 23 January 2025. <https://jurnal.hukumonline.com/a/5cb4a04f01fb730011dd3a50/perlindungan-hukum-perawat-praktik-atas-tindakan-pelayanan-gawat-dan-darurat-pada-masyarakat-pedesaan-di-desa-susukan-kabupaten-semarang>.
- Triana, Yeni, Sri Winarsi, Fatma Khairul, and Nelda Ningsih. 'Perlindungan Hukum Terhadap Perawat Pada Rumah Sakit Berdasarkan Undang-Undang Nomor 38 Tahun 2014 Tentang Keperawatan'. *Jurnal Pendidikan Dan Konseling (JPDK)* 5, no. 2 (March 2023): 1938–147. <https://doi.org/10.31004/jpdk.v5i2.13280>.
- Tribakti, Ichlas, Edy Wijayanti, and Yusak Andri Ende Putra. 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya'. *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149. <https://doi.org/10.59585/bajik.v3i1.507>.
- . 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya'. *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149. <https://doi.org/10.59585/bajik.v3i1.507>.
- . 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya'. *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149. <https://doi.org/10.59585/bajik.v3i1.507>.
- . 'Perlindungan Hukum Perawat Dari Kekerasan Pasien Dan Atau Keluarganya'. *Barongko: Jurnal Ilmu Kesehatan* 3, no. 1 (October 2024): 121–149. <https://doi.org/10.59585/bajik.v3i1.507>.
- Vitrianingsih, Yeni, Slamet Suhartono, Yovita Arie Mangesti, and Budiarsih. 'Doctors' Legal Protection of Midwives And Nurses Professionals In Medical Actions In Hospitals'. *YURISDIKSI: Jurnal Wacana Hukum Dan Sains* 19, no. 3 (December 2023): 423–432. <https://doi.org/10.55173/yurisdiaksi.v19i3.212>.
- Wulandari, Yulianti, and Faisal Satiago. 'The Use of Mediation to Resolve Dispute on Health Services as a Legal Protection for Nurse'. Paper presented at Proceedings of the 1st International Conference on Law, Social Science,

<https://doi.org/10.5281/zenodo.18357611>

Economics, and Education, ICLSSEE 2021, March 6th 2021, Jakarta, Indonesia. 5 May 2021. https://eudl.eu/doi/10.4108/eai.6-3-2021.2306383?utm_source=chatgpt.com.

<https://doi.org/10.5281/zenodo.18357611>