Video Transcript

The Patient Bill of Rights is a list of rights first developed in 1973 and then revised in 1992, by the American Hospital Association.

These rights have been formulated over time using a combination of state and federal laws, medical ethics and generally accepted practices.

Federal laws such as HIPAA, The ADA, the Civil Rights Act of 1964, the Emergency Medical Treatment & Labor Act and The Patient Self-Determination Act all play a role in patient rights.

At the core of patient rights is the right to be treated with dignity and respect and the right to be empowered to make decisions about personal healthcare choices.

Why Are Patient Rights So Important?

A strict adherence to patient rights is required by the Centers for Medicare and Medicaid and by the Joint Commission on Healthcare Accreditation.

Organizations that commit themselves to patient rights are more competitive in the marketplace, have a stronger reputation in the community and have lower insurance rates.

Committed healthcare organizations also receive fewer medical errors and malpractice lawsuits, government fines and sanctions and employ more talented professionals.

Healthcare professionals who carefully adhere to patient rights experience greater job satisfaction, enjoy more career advancement and make fewer medical errors.

Survival as an institution requires a dedicated commitment to these rights and therefore all employees must learn, respect and follow them at all times.

The Rights

Courtesy, Compassion, Dignity and Respect

Patients have the right to be listened to, to have their opinions valued and respected, and to receive a prompt or reasonable response to questions and requests.

Patients have the right to be treated with courtesy and
compassion while receiving care in an environment free from discrimination.

Patients have the right to not be treated differently or unfairly due to age, race, ethnicity, culture, socioeconomic status, sex, sexual orientation, gender identity or the ability to pay.

Patients have the right to receive visitors, make telephone calls and send mail unless a medical restriction is necessary.

Patients have the right to have their spiritual, personal and cultural needs met, including but not limited to diet, clothing, prayer and access to pastoral care.

Patients have the right to know the names and accreditations of caregivers who treat them including the doctor primarily responsible for their care.

Patients have the right to receive notice of their rights and responsibilities and to receive the facility's rules and regulations as soon as it is practical upon check-in or admittance.

**Personal Representatives**

Patients have the right to assign a personal representative (also called an advocate) to be with them during care. The advocate can be a family member or a friend.

The personal representative is selected for both emotional support and to assist the patient with communication and decision making.

Representatives have both the right to receive the same information as patients and to act on the their behalf when the patient is unable to do so.

**The Right to Self Determination**

The patient right to make informed decisions about personal healthcare is guaranteed by state and federal law and is integral to medical ethics.

This process, called *informed consent*, is the backbone of quality medical care.

It is vital that patients understand their decision making role in personal healthcare choices as soon as they enter your facility.

When patients are actively engaged in this process
their rights are truly respected and the likelihood of medical errors is significantly reduced.

Written informed consent is required for treatments which are serious or invasive.

This includes:

- most surgeries
- tests like biopsies
- treatments such as chemotherapy
- procedures like endoscopies
- educational studies
- clinical trials or
- any other medical research.

However, patient consent is not needed in emergency situations where serious or irreversible harm is imminent without immediate medical care.

A signature alone does not constitute valid patient consent. Informed consent is the process of communication between patients and healthcare providers that lasts the duration of the treatment.

There are three steps to the process of achieving legal patient consent.

1. The patient must be given the diagnosis, suggested treatments and alternative treatments.

   It is vital that all aspects of all viable treatments are thoroughly explained. This includes but is not limited to, risks, benefits, length of recovery time and follow-up treatments required like physical therapy.

2. Patients must fully understand all of the treatment information that has been given to them.

   The information must be given in common, easy to understand language that avoids complex medical terms and patient comprehension must be assessed.

   When providers suspect patients are struggling to understand the information, it should be repeated and patients should be asked to explain the information in their own words.

   Patients have the right to receive the information in their preferred language and the healthcare provider must provide a translation or translator to ensure it is understood.
Patients with vision, speech, hearing or mental disabilities have the right to receive important information in a manner that meets their needs.

If there is confusion due to stress, pain, medication or intoxication then healthcare providers should either wait until the patient is able to understand or seek a personal representative.

If the patient is a minor or is mentally, cognitively or physically unable to give informed consent then the patient's parent, legal guardian, or a person authorized by the court is responsible.

3. The patient must consent to the treatment.

Coercive situations are common in healthcare. Patients can feel helpless and intimidated in the face of healthcare decisions.

For consent to be legally valid, it's vital that patients are not pressured or intimidated into a particular treatment or procedure.

Patients must be allowed to ask questions and be given time to research and consult with family and friends when the opportunity exits.

Consent does not end with a signature. It is an ongoing process and can be withdrawn at any time as long as patients have the capacity to make decisions.

While consent is not needed for basic procedures like blood pressure or heart rate tests or in situations when consent is implied such as basic checkups, the spirit of informed consent still applies.

Open communication respects the dignity of patients and reduces medical errors. All procedures and tests should be explained to the patient, no matter how minor.

Patients have the right to refuse any procedures, tests or treatments even if the refusal may result in serious injury or death and the healthcare provider must respect that decision.

Failing to obtain informed consent is considered criminal battery by the courts and may leave physicians liable for negligence or constitute medical malpractice.

**Advanced Directives**
Upon entering a healthcare facility, patients, (or their advocates or family when the patient is incapacitated), must be asked if they have an advanced directive that details the patient’s medical wishes should they be unable to express them themselves.

Advanced directives should be placed in the patient’s medical file and patients must be informed of any hospital policies that may conflict with directives.

**Unintended Outcomes and Mistakes**

Patients have the right to know when something goes wrong with their care. This includes the right to know when mistakes have been made by the facility's staff.

When complications or errors occur, patients have the right to receive an apology.

**Pain Management**

As part of the right to make decisions about their own health care, patients have the right to have their pain addressed.

Health care providers must listen to patient concerns about pain and work with the patient to develop a plan to manage the pain.

**Medical Records and the Right to Privacy**

Patients have the right to receive a copy of their medical records upon request and may ask for their records as many times as they wish.

This includes the right to receive a full list of all current medications and an explanation of why they have been prescribed.

Patients also have the right to have their medical records kept private and secure. Only professionals directly involved in the patient’s care should have full access to these records.

Even to release information to family members requires verbal patient consent.

Healthcare workers such as lab technicians should only have the minimum amount of patient health information necessary to do their jobs effectively.

Public places should be avoided when discussing private medical information with a patient or with colleagues.
directly involved with the patient's care

If a private location is not possible, avoid using the patient's name or other identifying characteristics and speak in a soft tone of voice to minimize the exposure of private information.

To release private patient health information for purposes such as research, clinical trials or marketing a signed patient authorization must be obtained.

When using the telephone, health information may never be left in a voice mail and may only be released to the patient themselves or to a third party they have authorized.

**Safety**

Patients have the right to a clean and safe environment and to personal safety while receiving their care.

This includes the right to be safe from abuse, neglect and mistreatment by staff, other patients and persons coming from outside the facility.

Strict adherence to privacy laws, site security measures and law enforcement guidance are critical to keep patients safe from domestic abusers and other dangerous persons.

Patients have the right to an environment safe from preventable infections and where great care is taken to reduce surgical or other treatment errors.

Patients have the right to be free from physical or chemical restraints and seclusion of any form for any reason except when medically necessary in emergency situations.

**Right to Emergency Care**

Federal law requires healthcare providers who offer emergency services to provide stabilizing treatment to patients regardless of their ability to pay.

This includes medical examinations and stabilizing treatments of emergency medical conditions including active labor.

If the facility lacks the capability to provide treatment or if the patient requests it, healthcare providers must transfer the patient to another facility.

**Costs and Complaints**

Patients have the right to an itemized list of their hospital
bills and a detailed explanation of every charge.

Patients have the right to complain if any of their rights are violated. Healthcare providers must have a system in place to receive and resolve patient complaints.

**Patient Responsibilities**

In addition to rights, patients also have responsibilities to ensure they receive effective treatment and dignified, compassionate care.

- Patients should ask questions.
- Patients should pay attention to instructions given by caregivers.
- Patients should share with caregivers as much information as possible about their health

**In Conclusion**

By focusing on patient rights, healthcare providers will give the extraordinary care that they would want for themselves and for their loved ones. This focus coupled with the great pride they take in providing compassionate care will highlight dignity and respect toward their patients.

And in the process healthcare providers will contribute to both organizational success and personal career growth.

Employee Quiz
1. (True / False) Patients have the right to assign a personal representative (also called an advocate) to be with them during care.

2. (True / False) During the informed consent process healthcare providers do not have to describe alternative treatments if they believe that the suggested treatment is the best option.

3. (True / False) Patients have the right to refuse any procedures, tests or treatments even if the refusal may result in serious injury or death and the healthcare provider must respect that decision.

4. (True / False) Failing to obtain informed consent can be considered criminal battery by the courts and may leave physicians liable for negligence or constitute medical malpractice.

5. (True / False) It’s the patient’s responsibility to inform the healthcare provider about advanced directives and patients must submit them within 24 hours of admittance.

6. (True / False) Due to the high risk of addiction, patient rights do not extend to pain management. These decisions lie solely at the discretion of the physician.

7. (True / False) Patients have the right to have their medical records kept private and secure. Only professionals directly involved in the patient’s care should have full access to these records.

8. (True / False) Federal law requires healthcare providers who offer emergency services to provide stabilizing treatment to patients regardless of their ability to pay.

9. (True / False) Patient protected health information may never be left in a voice mail and may only be released to the patient or to a third party they have authorized.

10. (True / False) Patients have the right to have their spiritual, personal and cultural needs met while in the healthcare facility.
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