

**Name:** Patient Rights and Responsibilities

**Last Review Date:** 01/20/2015

**Next Review Date:** 01/20/2018

**Expiry Date:** 05/13/2065

**Description:** Patient Rights and Responsibilities, Compliance, PHI, Joint Notice of Privacy Practices

**Policy Number:** FH-COM.067

**Origination Date:** 10/02/2014

**Supersedes:** CPM.0016, 80100-063, SJH.ADM.036



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**Purpose:** To facilitate the provision of considerate, respectful care focused on each inpatient or outpatient's individual needs.

**Definitions:**

A. In Loco Parentis: Referring to an individual who assumes parental status and responsibilities for another individual, without formally adopting that person.

B. Protected Health Information (PHI) – Any individually identifiable health information, whether oral, written, electronic, transmitted, or maintained in any form or medium that:

- 1) Is created or received by a health care provider, a health plan, or a health care clearinghouse; and
- 2) Relates to an individual's past, present, or future physical or mental health condition, health care treatment, or the past, present or future payment for health care services to the individual; and
- 3) Either identifies an individual (for example, name, social security number or medical record number) or can reasonably be used to find out the person's identity (address, telephone number, birth date, e-mail address, and names of relatives or employers).

C. Patient Representative: Someone designated by the patient.

**Policy:**

A. Patient Rights:

1. The Hospital will inform each patient, or when appropriate, the patient's representative as allowed by State law, of the patient's rights. Whenever possible, this notice will be provided before providing or stopping care.
2. All patients, inpatient or outpatient, must be informed of their rights as hospital patients.
3. To the extent permitted by law, any of the rights delineated in this policy may be exercised on the patient's behalf by a guardian, surrogate or other legally authorized representative in the event the patient has been adjudicated incompetent in accordance with law, is found by his or her physician to be medically incapable of understanding the proposed treatment or procedure, is unable to communicate his or her wishes regarding treatment or is an emancipated minor.
4. When a patient who is not incapacitated has designated, either orally to hospital staff or in writing, another individual to be his/her representative, the hospital must provide the designated individual with the required notice of patients' rights in addition to the patient.
5. The patient rights should be provided and explained in a language or manner that the patient (or patient's representative) can understand.
6. The patient must be asked whether the hospital should notify a family member or representative about the admission. If the patient requests such notice and identifies the family member or representative to be notified, the hospital must provide such notice promptly to the designated individual.
7. The patient must be asked whether the hospital should notify his/her own physician.
8. A patient may not be denied appropriate hospital care because of the patient's race, creed, color, national origin, ancestry, religion, sex, sexual orientation, gender identity, marital status, age, newborn status, handicap or source of payment.
9. The patient's personal values, beliefs, and preferences, including personal needs for privacy, safety, effective pain management, and the right to religious and spiritual services are respected. If audio/visual monitoring is used, the patient or their representative must be made aware of the monitoring. The hospital accommodates the patient's right to spiritual or religious services.

10. The patient will be provided professional interpreter service free of charge to support effective communication.
11. The patient shall be entitled to know who has overall responsibility for his/her care.
12. The patient may designate persons who may be involved in his/her plan of care.
13. The patient shall have the opportunity to make health care decisions in collaboration with his or her physician and to participate to the fullest extent possible in planning for his or her care and treatment, including ethical issues that may arise.
14. The patient may refuse treatment, without retaliation, to the extent permitted by law and shall be informed of the medical consequences of the refusal.
15. At the time of admission the patient/ designated representative shall have access to the hospital's policies on Patient Rights and Responsibilities for the initiation, review and resolution of patient complaints. Any unresolved issues regarding care, treatment, services and safety may be reported to The Joint Commission, the Wisconsin Department of Health and Family Services or, if the complaint relates to privacy of health information, to the Office of Civil Rights, United States Department of Health and Human Services at the following addresses:

### **The Joint Commission**

**1-800-994-6610**

or e-mail concern to: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)

### **Wisconsin Department of Health and Family Services**

#### **Office of Quality Assurance; Health Service Section**

PO Box 2969

Madison, Wisconsin 53701-2969

Telephone: **608-266-8481**

### **Office for Civil Rights Region V**

#### **United States Department of Health and Human Services**

233 North Michigan Avenue Suite 240

Chicago, IL 60601

Telephone: **1-800-368-1019**

16. The patient will be informed of their right to choose who may visit them during their inpatient stay, regardless of whether the visitor is a family member, a spouse, a domestic partner (including a same-sex domestic partner), or other type of visitor, as well as their right to withdraw such consent to visitation at any time. Chosen visitors may visit as long as the patient desires, unless that individual's presence infringes on the rights and safety of others or is medically or therapeutically contraindicated.
17. Unless contraindicated, the patient has the right to safe access to the outdoors, as appropriate, during long lengths of stay.
18. The right to considerate treatment extends particularly to patients who are dying who shall be given optimal comfort and dignity, including treatment of responding to primary and secondary symptoms, as desired, effective pain management and acknowledgement of the psychosocial and spiritual concerns regarding dying and the expression of grief.
19. The patient, the patient's representative or any person authorized verbally or in writing by the patient shall receive, from the appropriate person within the Hospital, notification of admission, information about the patient's illness, course of treatment and prognosis for recovery in terms the patient and/or designated individual can understand.
20. In the case of a patient who is incapacitated, when an individual presents the hospital with an advance directive, medical power of attorney or similar document executed by the patient and designating an individual to make medical decisions for the patient when incapacitated, then the hospital must, when presented with the document, provide the Patient Rights notification to the designated representative.
21. When a patient is incapacitated or otherwise unable to communicate his or her wishes, there is no written advance directive on file or presented, and an individual asserts that he or she is the patient's spouse, domestic partner (whether or not formally established and including a same-sex domestic partner), parent (including someone who has stood in loco parentis for the patient who is a minor child), or other

family member and thus is the patient's representative, the hospital is expected to accept this assertion, without demanding supporting documentation, and provide the required notice to the individual, unless:

- a) More than one individual claims to be the patient's representative. In such cases, it would be appropriate for the hospital to ask each individual for documentation supporting his/her claim to be the patient's representative. The hospital should make its determination of who is the patient's representative based upon the hospital's determination of who the patient would most want to make decisions on his/her behalf.
- b) (Examples of documentation could include, but are not limited to, the following: proof of a legally recognized marriage, domestic partnership, or civil union; proof of a joint household; proof of shared or co-mingled finances; and any other documentation the hospital considers evidence of a special relationship that indicates familiarity with the patient's preferences concerning medical treatment);
- c) A refusal by the hospital of an individual's request to be treated as the patient's representative, based on one of the above-specified familial relationships, must be documented in the patient's medical record, along with the specific basis for the refusal.

22. Except in emergencies, the consent of the patient or the patient's representative shall be obtained before diagnostic procedures are administered or surgical procedures or other treatments are performed.
23. Except in emergencies, the patient may not be transferred to another facility without being given a full explanation for the transfer without provision being made for continuing care and without acceptance by the receiving institution.
24. The patient may formulate an advance directive and appoint a surrogate to make health care decisions on the patient's behalf to the extent permitted by Wisconsin law and the hospital's advance directive policy.
25. The patient or authorized representative has the right for their wishes concerning organ/tissue donation to be honored within the limits of the law or hospital capacity.
26. The patient or the patient's representative shall give prior informed consent for the patient's participation in any form of research.
27. Patients or their representative will be informed of any significantly unexpected outcome relating to an event where the patient outcome is different than expected.
28. The patient has the right to be free from all forms of abuse and harassment.
29. The patient has the right to be free from restraints and seclusion in any form when used as a means of coercion, discipline, convenience for the staff or retaliation. Restraints or seclusion may only be imposed to ensure the immediate physical safety of the patient, a staff member, or others and must be discontinued at the earliest possible time.
30. The patient will be given a copy of the Joint Notice of Privacy Practice.
31. The patient's medical record, including all computerized medical information, shall be kept confidential in accordance with the requirements of state and federal law.
32. The patient or any person authorized by law shall have access to the patient's medical record and/or receive a copy upon request.
33. The patient may request certain restrictions of the hospital's use and disclosure of his/her protected health information (PHI).
34. The patient may request that his/her medical record be amended if it is believed the information is incomplete or incorrect.
35. The patient shall be permitted to examine his or her hospital bill and receive an explanation of the bill regardless of source of payment, and the patient shall receive, upon request, information relating to financial assistance available through the hospital.
36. The patient may request a list of all disclosures made by the Hospital, as required by federal regulations.

#### B. Patient Responsibilities:

1. The patient or the patient's representative is responsible for providing a complete and accurate medical history, including current physical complaints, medications, past illnesses and hospitalizations and other matters relating to the patient's health.

2. The patient or the patient's representative is responsible for cooperating in the patient's treatment, which includes:
  - a. Communicating to care givers whether or not the plan of care and expectations during hospitalization are understood.
  - b. Following the plan of care recommended by the treating physician and the instructions of the attending nurses and other caregivers, or upon refusal to do so, accepting the consequences of such refusal.
  - c. Promptly reporting any unexpected changes in the patient's condition to the treating physician or nurse, therapist or other caregiver.
3. The patient or the patient's representative is expected to cooperate with the hospital toward making appropriate arrangements for payment of the hospital's charges for care and treatment, including providing all required information and signing all appropriate documents.
4. The patient or the patient's representative is responsible for the patient's observance of the hospital's policies, rules and regulations, including the rules on visitors, noise control and smoking.
5. The patient or the patient's representative is expected to treat hospital personnel, other patients and visitors with consideration and respect and to be respectful of the property of other persons and of the hospital.

## Related Policies:

### FH Corporate Policies

- A. FCH-COM.004 – Patients Right to Restrict Use or Disclosure of Protected Health Information.
- B. FCH-FIN.0017 – Financial Assistance
- C. FH-COM.040 – Human Research Protection Program
- D. FH-HIM.003 – Handling Corrections, Errors, Omissions or late Entries in the Legal Health Record (LHR)
- E. FH-HR.040 – Caregiver Misconduct

### FMLH Policies

- A. CPA.0107 – Important Message from Medicare (IM)
- B. CPM.0005ic – Visitor Regulations
- C. CPM.0006 – Restraint
- D. CPM.0020 – Patient Complaint Grievance Reporting and Investigation
- E. CPM.0022 – Advance Directive-Multidisciplinary
- F. CPM.0026 – Ethics Consultation
- G. CPM.0038 – Provision of language Services
- H. CPM.0065 – Sentinel Event
- I. CPM.0067 – Pain Management
- J. CPM.0092 – Protected Health Information (PHI)-Amendment of
- K. CPM.0150 – Emergency Medical Treatment and Active Labor Act (EMTALA)
- L. SOT.482.102.1 – Informed Consent Process

### CMH Policies

- A. 60090-012 – Visiting Regulations-Mental Health Center
- B. 64310-003 – Visitation in the Special Care Nursery (SCN)
- C. 65000-008 – Violent/Self-Destructive Restraints/Seclusion (Behavioral)
- D. 65000-033 – Restraints, Non-violent/Non-Threatening (Medical)
- E. 65000-035 – Donation of All or Any Part of the Decedents's Body
- F. 65000-057 – Future Health Care Decision Making: Health Care Powers of Attorney and/or Living Wills (Advance Directives)
- G. 80100-018 – Ethics Consultation
- H. 80100-027 – Interpretative and Translation Services

- I. 80100-086 – Pain Management
- J. 80100-118 – Patient Grievance Reporting and Investigation
- K. 80100-120 – Visiting Hours
- L. 80100-121 – Emergency Medical Treatment and Active Labor Act (EMTALA)
- M. 82300-021 – Amendment of Protected Health Information (PHI)
- N. 65000-001 – Important Message from Medicare (IM)

SJH Policies

- A. CPM.0092 – Protected Health Information (PHI)-Amendment of
- B. SJH.ADM.019 – Emergency Medical Treatment and Active Labor Act – EMTALA
- C. SJH.ADM.020 – Ethics Committee
- D. SJH.ADM.028 – Interpretative and Translation Services
- E. SJH.ADM.035 – Patient Complaint Grievance Reporting and Investigation
- F. SJH.ADM.054 – Visiting Hours
- G. SJH.CLN.001 – Advance Directives
- H. SJH.CLN.084 – Pain Management
- I. SJH.CLN.146 – Restraints Non Violent Non-Threatening
- J. SJH.CLN.147 – Restraints Violent- Self-Destructive Restraint
- K. SJH.CLN.150 – Donation of All or Any Part of the Decedents’s Body
- L. SJH.CLN.166 – Important Message from Medicare (IM)

**Reference Details:** Hospital Conditions of Participation (State Operations Manual):  
[http://cms.hhs.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_a\\_hospitals.pdf](http://cms.hhs.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_a_hospitals.pdf)  
State of Wisconsin-Department of Health Services, Division of Quality Assurance P-62025 (Rev 12/08):  
<http://www.dhs.wisconsin.gov/publications/p6/p62025.pdf>

**Issuing Authority:** FH Corporate Policy Committee

**Distribution:** Froedtert Health

**Reference Type:** Federal Law Including CMS