

PATIENT RIGHTS AND RESPONSIBILITIES

- I. PURPOSE: To emphasize our concern for patients' welfare and establish a policy on patient rights and responsibilities at this Medical Center.
- II. POLICY:
 - A. Patients' personal dignity shall be recognized and respected in the provision of all care and treatment in a manner that displays courtesy, compassion and competency.
 - B. Each patient shall receive a copy of the "Patient's Handbook." Also, the patient/resident shall be informed of his/her rights and responsibilities, information pertaining to "Withholding or Withdrawal of Life Sustaining Treatment" and Advanced Health Care Directives. This should be conveyed in a language the patient understands.
 - C. Admission to the Medical Center does not deprive a person of his/her civil or legal rights. Patients who receive treatment at this facility are expected to accept certain responsibilities.
- III. RESPONSIBILITY: The responsibility for ensuring the rights of patients at all times (whether patient is an inpatient or an outpatient) is center-wide.
- IV. DEFINITIONS:
 - A. Residents and Inpatients: Unless restricted by a written doctor's order, patients admitted on residential or inpatient care basis to the VA medical care system have the following rights:
 1. The right, along with the treating physician, to make decisions involving his health care.
 2. The right to accept or refuse medical care or treatment to the extent permitted by law.
 3. The right to formulate advance directives or to appoint a surrogate to make health care decisions.
 4. The right to know that the provision of care is not conditioned on existence of an advance directive.
 5. The right to know that the existence of an advance directive is documented in his medical record and reviewed periodically with patient or surrogate.

Right to Know: Each patient has a right to information necessary to enable him/her to make decisions that reflect his wishes. Each patient has a right to know that the VA medical care system has a policy on informed decision making that is developed by the medical staff governing body and is consistent with any legal requirements.

- C. Ethical Issues: Each patient or his/her designee has the right to participate in the consideration of ethical issues that arise in the patient's care. Each patient has a right to know that the organization has in place a mechanism for consideration of ethical issues arising in the care of the patient and provides education to care givers and patients on ethical issues in health care.
- D. Experimentation: Each patient has the right to be informed of any human experimentation or other research educational projects affecting his/her care or treatment.
- E. Incompetence: Each patient who has a guardian, next of kin, or legally authorized responsible person, can exercise (to the extent permitted by law) the rights delineated on behalf of the patient if the patient has been adjudicated incompetent in accordance with the law, found by his/her physician to be medically incapable of understanding the proposed treatment or procedure, and is unable to communicate his/her wishes regarding treatment.
- F. Visitations and Communications: Each patient has the right to communicate freely and privately with persons outside the facility, including government officials, attorneys, and clergymen. To facilitate these communications, each patient shall be provided the opportunity to meet with visitors during regularly scheduled visiting hours, convenient and reasonable access to public telephones for making and receiving telephone calls, and the opportunity to send and receive unopened mail.
 - 1. Communications with attorneys, law enforcement agencies, government officials or representatives of recognized service organizations when the latter are acting as agents for the patient in matters concerning VA benefits, shall not be reviewed.
 - 2. A patient may refuse visitors.
 - 3. If a patient's right to receive unopened mail is restricted, the patient shall be required to open the sealed mail while in the presence of an appropriate person for the sole purpose of ascertaining whether the mail contains contraband material, i.e., implements which pose significant risk of bodily harm to the patient or to others or any drugs or medication. Any such material will be held for the patient or disposed of in accordance with instructions concerning patient's mail published by the Department of Veterans Affairs and/or the local health facility.

4. Each patient shall be afforded the opportunity to purchase, at his/her own expense, letter writing material, including stamps. In the event a patient needs assistance in buying writing material, or in writing, reading, or sending mail, the medical facility will attempt (by means of volunteers) at the patient's request, to provide such assistance to mail at least one letter each week.
 5. All information gained by staff personnel of a medical facility during the course of assisting a patient in writing, reading, or sending mail is to be kept strictly confidential except for any disclosure required by law.
- G. Clothing: Each patient has the right to wear his/her own clothing.
- H. Personal Possessions: Each patient has the right to keep and use his/her own personal possessions consistent with the available space, governing fire safety regulations, restrictions on noise, and restrictions on possession of contraband material, drugs, and medications.
- I. Money: Each patient has the right to keep and spend his/her own money and to have access to funds in his/her account in accordance with instructions concerning personal funds of patients published by the Department of Veterans Affairs.
- J. Social Interaction: Each patient has the right to social interaction.
- K. Exercise: Each patient has the right to regular physical exercise and to be outdoors at regular and frequent intervals. Facilities and equipment for such exercise shall be provided.
- L. Worship: The opportunity for religious worship shall be made available to each patient who desires such opportunity. No patient will be coerced into engaging in any religious activities against his/her desire.
- M. Comfort and Dignity of Dying Patient: The care of the dying patient optimizes the comfort and dignity of the individual through:
1. Treating primary and secondary symptoms that respond to treatment as desired by patient and his/her surrogate decision maker;
 2. Appropriately and aggressively managing pain; and,
 3. Acknowledging the psychosocial and spiritual concerns of the patient and family regarding dying.

V. PROCEDURES:

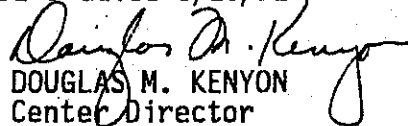
- A. Patients have a right to be treated with dignity in a humane environment that affords them both reasonable protection from harm and appropriate privacy with regard to their personal needs.
- B. Patients have a right to receive, to the extent of eligibility under that law, prompt and appropriate treatment for any physical or emotional disability. When the organization cannot meet the request or need for care due to a conflict with its mission or philosophy or incapacity to meet the patient's needs or requests, the patient may be transferred to another facility when medically permissible. Such a transfer should be made only after the patient has received complete information and explanation concerning the needs for, and alternatives to, such a transfer. The transfer must be acceptable to the receiving organization.
- C. Patient care includes the recognition of psychosocial, spiritual and cultural values that impact the patient's response to the care given. Organizational policies and procedures should allow the patient to express spiritual beliefs and cultural practices that do not harm others or interfere with the planned course of medical therapy for the patient.
- D. Patients have the right to the least restrictive conditions necessary to achieve treatment purposes.
- E. Patients have the right, within the limits of law, to personal privacy and confidentiality of information:
 1. To be interviewed, examined and treated in surroundings designed to give reasonable visual and auditory privacy.
 2. To have access to his/her medical record and to have his/her medical record read only by individuals directly involved in his/her care, or by individuals who are monitoring the quality of the patient's care, or by individuals authorized by law or regulation (other individuals may read the medical record only with the patient's written consent or that of a legally authorized or designated representative)..
 3. To request a transfer to a different room if another patient or a visitor in the room is unreasonably disturbing him/her and another room equally suitable for his/her care needs is available.
- F. No patient in the VA medical care system, except as otherwise provided by the applicable state law, shall be denied legal rights solely by virtue of being voluntarily admitted or involuntarily committed. Such legal rights include, but are not limited to the following:
 1. The right to hold and to dispose of property within the limits of the law.

2. The right to enter into contractual relationships.
 3. The right to register and vote.
 4. The right to marry and to obtain a separation, divorce, or annulment.
 5. The right to hold a professional, occupational, or vehicle operator's license.
 6. Patients or their surrogate decision makers have the right to request the withholding or withdrawing of life-sustaining treatment in VA health care facilities. Information regarding this right can be found in station circular entitled "Withholding or Withdrawal of Life Sustaining Treatment."
 7. A right set forth may be restricted within the patient's treatment plan by written order signed by the appropriate health professional. If it is determined that a valid and sufficient reason exists for a restriction, the order imposing the restriction and a progress note detailing the indications are entered into the patient's permanent medical record.
- G. For the purpose of this document, a valid and sufficient reason exists when, after consideration of pertinent facts, including the patient's history, current condition and prognosis, a health professional reasonably believes that the full exercise of the specific right would:
1. Adversely affect the patient's physical or mental health;
 2. Under prevailing community standards, likely stigmatize the patient's reputation to a degree that would adversely affect the patient's return to independent living;
 3. Significantly infringe upon the rights of or jeopardize the health or safety of others;
 4. Have a significant adverse impact on the operation of the medical facility to such an extent that the patient's exercise of the specific right should be restricted. In determining whether a patient's specific right should be restricted, the health professional concerned must determine that the likelihood and seriousness of the consequences that are expected to result from the full exercise of the right is so compelling as to warrant the restriction. The Service Chief or the Chief of Staff, as designated by local policy, should concur with the decision to impose such restriction.
 5. If it has been determined that a valid and sufficient reason exists for restricting any of the patient's rights, the least restrictive method for protecting the interest or interests shall be employed;
 6. The patient must be promptly notified of any restriction imposed and the reasons; and,

- M. Other Rights: The rights described in this paragraph are in addition to and not in derogation of any statutory, constitutional or other legal rights. (38 U.S.C. 210.6210)
- N. In the long term care facility, the patient/resident shall be informed of his/her rights and responsibilities and this will be evidenced by written acknowledgement. If the patient/resident is incompetent or medically incapable of understanding, these rights and responsibilities will be assumed by the guardian, next of kin or legally authorized responsible person.
- O. In the psychiatric/SATP unit, the patient shall also be informed of any additional rights and responsibilities expected of him/her. This information will be described upon arrival on the unit and will be evidenced by written acknowledgement.
- P. Copies of the patient rights and patient responsibilities will be current, up to date, and posted on all wards and waiting rooms (VA Poster 10-88).
- Q. It is the responsibility of each Medical Center employee to ensure the patient rights and responsibilities are within compliance and not violated.
- R. The mechanism for receiving and responding to patients' and families' complaints concerning the quality of care is outlined in station circular entitled, "Procedures for Handling Special Interest Correspondence and Verbal Inquiries."

VI. REFERENCES: Accreditation Manual for Hospitals, JCAHO
 Accreditation Manual for Long Term Care Facilities, JCAHO
 M-2, Part V, Chapter 2, Paragraph 2.03
 VA Regulations 17.34-17.34a.
 Station Circular entitled "Withholding or Withdrawal of
 Life Sustaining Treatment"
 Station Circular entitled "Patient Physical Restraints"
 Station Circular entitled "Policy for Patients Held in
 Seclusion"
 Station Circular entitled "Procedures for Handling Special
 Interest Correspondence and Verbal Inquiries"

VII. RESCISSION: Station Circular 00-92-3 dated 6/26/92


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 Center Director

Distribution C

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