
Title:	Patient Rights and Responsibilities (AC System)
Owner:	[REDACTED]
Recommending Group:	Rights and Responsibilities Work Group
Oversight Group:	System Policy Council
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Approval By:	[REDACTED]
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POLICY

Patients and their parents or legal guardians have rights and responsibilities while receiving treatment at Arkansas Children's (AC).

PROCEDURE

I. Patient Rights

- A. All patients (or caregivers/guardians if the patient is a minor) have the following rights with respect to their medical care:
1. To be free from discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression.
 2. To be treated in a dignified and respectful manner, protecting personal privacy when at all possible.
 3. To know the names of doctors, nurses, and other staff members providing care and to expect them to work as a team.
 4. To work with the medical team, in the patient's preferred language, to develop a plan of care including an understanding about their illness, treatment choices, risks and benefits.
 5. To agree, refuse, or change their mind about treatment during hospitalization and to know how refusal of a treatment will likely affect them.
 6. To know about unanticipated outcomes of care, treatment and services.
 7. To have access to appropriate staff who can help with or facilitate referrals for help with schoolwork while hospitalized.
 8. To know about hospital rules, how things are done, and how that affects the patient and their care.
 9. To practice their faith and customs as long as these do not cause problems for others or provide a concern for safety.
 10. To agree or refuse to take part in a research program relating to their illness and treatment. If the patient refuses, other treatment or programs, if any, will be offered.
 11. To have their pain level assessed and managed.
 12. If the patient is 18 or over, to have a written "living will" or "advance directive" describing what medical care the patient chooses if unable to speak for

himself/herself. This document will describe choices for life support and who may direct their medical care when the patient cannot; these choices should be discussed with their doctor. There is not a requirement to have a "living will" in order to receive care.

13. To receive care in a safe setting free from abuse.
14. To obtain information on protective services resources and request assistance in accessing those resources, if needed.
15. To have their health information/medical record kept confidential; to review the medical record and have it explained to them.
16. To be free from restraints and seclusion of any form used for coercion, discipline, convenience, or retaliation or which are not medically necessary.
17. To have the hospital make every attempt to locate and notify a family member or representative of the hospitalization if a minor arrives unaccompanied to the hospital and gets admitted. This does not constitute consent to protected health information. For those over 18 and incapacitated, steps will be taken to identify a family member/representative and notify them of the patient's admission.
18. To file a complaint with the hospital and have the complaint promptly addressed. To have the complaint process explained along with anticipated time frames for resolution.

B. Unique Rights for Adult Patients: (18 and over)

1. The right to choose their support person to be present during the course of hospitalization unless the presence of the support person infringes on other's rights, safety or is medically or therapeutically not indicated.
2. This person may or may not be the patient's surrogate decision maker or legally authorized representative.
3. The hospital will follow the same non-discrimination guidelines as in I.A.1 regarding the patient's selection of their support person.

II. Patient and Family Responsibilities

- A. Safety of patients and families is a priority. All parents and caregivers are advised to never release their child into the care of anyone who does not wear an AC/ UAMS picture identification badge.
- B. To ask questions of any member of the healthcare team to fully understand the treatment plan.
- C. To follow the plan of care agreed upon with the treatment team.
- D. To voice any concerns about care to the doctor, nurse, nurse supervisor, or the Patient and Family Representative.
- E. To follow the hospital rules which apply to parents/patients and their visitors; failure to follow the doctor's orders or the hospital rules or disturbing others may result in limitations on visits and other rights.
- F. To provide a complete health history, current symptoms/complaints, known medication allergies, and current medications, both prescribed and over the counter.

- G. To respect the privacy of other patients, families, and staff.
- H. To tell the hospital who to bill for payment of care received; to ask for financial counseling if assistance is needed for payment.

III. Complaint Notification

- A. Complaints about violation of Patient Rights may be directed to the Patient and Family Representative, (501)364-1198. Patients may also contact the Patient and Family Representative or the Health Facility Services Division of the Arkansas Department of Health, 5800 West 10th St., Suite 400, Little Rock, Arkansas 72204, (501) 661-2201, to file a grievance regarding violation of these rights. A patient may contact the Arkansas Department of Health regardless of whether a grievance has been filed with the hospital.
- B. Arkansas Children's is accredited by The Joint Commission (TJC) and patients are encouraged to contact them if it is felt that AC has not resolved a patient or family's concerns. TJC can be reached by telephone at 1-800-994-6610 or by e-mail at complaints@jointcommission.org.

IV. Dissemination of Rights and Responsibilities

- A. The Rights and Responsibilities document will be made available to patients in the following ways:
 - 1. Provided upon admission by the Admission Office to the hospital (inpatient) or PIA in the clinic visit (outpatient). Provisions will be documented in the patient's record annually.
 - 2. Parent Handbook via AC website.

REFERENCES

- 1. See Administrative Policies:
 - a. [Patient Parent Complaint Grievance Procedure](#)
 - b. [Administrative Compliance with HIPAA Privacy Regulations \(System-Wide\)](#)
 - c. [Code of Ethical Behavior \(System-Wide\)](#)
 - d. [Advance Directives \(System-Wide\)](#)
 - e. [Use and Disclosure of Protected Health Information \(System-Wide\) \(v.7\)](#)
- 2. Joint Commission Regulatory Standards: <http://e-dition.jcrinc.com/Frame.aspx>
 - a. RI. 01.01.01
 - b. RI .01.05.01
 - c. RI. 02.01.01
- 3. Centers for Medicare/Medicaid Services (CMS) standards:
 - a. 482.13(b), 1-4
 - b. 482.13(c), 1-3
 - c. 482.13(d),1

ENDNOTES

1. Keywords – Rights, Responsibilities, Joint Commission, TJC, CMS, complaint, living will, non-discrimination, discrimination, human rights, gender, sexuality, sexual orientation
2. Supersedes: December, 2017
3. Original Creation Date: 09/01/1991
4. Writers / Stakeholders: Rights and Responsibilities Work Group (which includes leaders from the Healthcare Equality Initiative Work Group)

ADDENDA

[Patient Rights and Responsibilities Handout \(Addendum\)](#)