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 Next Review Due: 6/5/2020
 Owner: *Michelle James: Regional Chief Nursing Officer/VP Operations SWR*
 Policy Area: *Patient's Rights and Ethics*
 References:
 Applicability: *WA - Providence St. Peter Hospital*

Patient Rights and Responsibilities

Policy Number: 86100-PRE-036

PURPOSE:

To outline the accountability of Providence caregivers and representatives to ensure that all patients are informed of their rights and responsibilities.

APPLIES TO:

This policy applies to all members of the Providence St Peter Hospital (PSPH) workforce, including caregivers (all employees), medical staff members, contracted service providers, and volunteers. It also applies to all vendors, representatives, and any other individuals providing services to or on behalf of ProvidenceSouthwest Washington Service Area. All of these groups will be referenced in this policy as “caregivers and representatives.”

POLICY STATEMENT:

Consistent with our Mission and core values and with applicable state and federal law, Providence respects and upholds the rights and responsibilities of all individuals receiving care and services at Providence St Peter Hospital (PSPH). Patients are made aware of their rights and responsibilities prior to receiving hospital care or services.

OBSERVATION & SAFETY FACTORS:

N/A

PROCEDURES:

1. “Patient rights and responsibilities” are posted at key entries to Providence St Peter Hospital (PSPH).
2. All patients or their designated representative will be given a patient rights brochure and will be asked to read and understand their patient rights.
3. In every encounter, patients will be treated with compassion and respect. Caregivers and providers will be educated on our patients’ rights and responsibilities.

4. If a caregiver becomes aware of a situation where a patient's rights may have been violated, the caregiver will inform his or her manager and fill out an Unusual Occurrence Report.

AGE-RELATED CONSIDERATIONS:

N/A

CONTRIBUTING DEPARTMENT/COMMITTEE APPROVAL:

WA Council

OWNER:

Chief Nursing Officer/VP of Operations, SWSA

REFERENCES:

- Joint Commission
- Conditions of Participation: Patient Rights 42 C.F.R 482.13 (1999)
- Washington Administrative Code 246-320-245

ADMINISTRATIVE APPROVAL:

Chief Administrative Officer, SWSA

All revision dates:

6/6/2017, 9/4/2014, 3/1/2014

Attachments:

No Attachments

Approval Signatures

Approver	Date
Medrice Coluccio: Chief Administrative Officer, Southwest Washington [PA]	6/6/2017
Michelle James: VP Operations / Regional Chief Nursing Officer	5/31/2017
Catherine Schwartz: Policy Coordinator	5/31/2017

Applicability

WA - Providence St. Peter Hospital



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 Owner: Cynthia Sidley: Director, Acute Care Nursing
 Policy Area: Patient's Rights and Ethics
 References:
 Applicability: WA - Providence St. Peter Hospital

Visitor Guidelines

Policy Number: 86100-PRE-040

PURPOSE:

Consistent with our Mission and core values, to provide guidelines on patient visitation that best meets the needs of patients in our care. In keeping with our vision statement, visitors are an integral part of patient care and support. High-quality, compassionate patient care is our first priority and will be the primary goals in establishing visitation guidelines. Providence St Peter Hospital (PSPH) is committed to partnering with patients and their loved ones to create a patient-centric experience.

APPLIES TO:

This policy applies to caregivers (all employees) and representatives of Providence St. Peter Hospital (PSPH).

POLICY STATEMENT:

To ensure a healing environment and to protect our patients and caregivers:

OBSERVATION & SAFETY FACTORS:

N/A

PROCEDURE:

1. Visitors are asked to always be respectful of other patients, caregivers and the property of Providence St Peter Hospital (PSPH).
2. For the safety and well-being of everyone on campus, visitors must comply with all posted signs and warnings on the facility campus.
3. A caregiver on the health care team may impose visiting restrictions when they are deemed essential for the health and well-being of a patient.
4. When patient care or safety is affected, visitors may be asked to leave a patient room at the discretion of the caregiver.
5. Visitors with symptoms of illness, such as cold, cough, fever, open wounds, or other illness/disease that

poses a risk may not be permitted to enter any patient care area.

6. Visitors must follow infection control isolation protocols as outlined in Providence St Peter Hospital policies.
7. Visitors of patients in isolation care must comply with stated requirements, such as wearing gloves, gown and mask, when in a patient's room.
8. Visitors who are identified as "high risk," as defined in this policy may be asked to follow an appropriate visitation plan that outlines visitation requirements and/or restrictions up to and including no visitation or access to the facility.
9. Visitors who become loud, disruptive, or who are lingering in hallways or restricted areas may be required to leave the facility.
10. Visitors may not bring non-prescribed medications or alcohol into a patient room.
11. Visitors may not bring guns or weapons into the facility (with the exception of on-duty and off-duty law enforcement).

A family member or support person may stay overnight in a patient room if approved in advance by the attending nurse. Out of respect for other patients, if a patient is in a semi-private room, visitors are encouraged to make other accommodation arrangements.

In the event of a pandemic event, such as widespread influenza, hospital visitation may be limited based on recommendations of the local county health department.

Defining family and significant others

1. When a patient is not able to designate who may visit, the care team may need to work with the patient's designated support person to determine visitation.
 - A. A surrogate decision maker appointed in compliance with Washington state law may exercise the patient's right to designate visitors.
 - B. Oral designation of a support person, regardless of the support person's legal status, is sufficient to establish the person who will designate visitation rights on the patient's behalf.
 - C. Written confirmation of a designation is not required by Providence St Peter Hospital (PSPH).
2. When a patient has not designated visitors or a support person and becomes incapacitated, the attending nurse will consult with the charge nurse to identify appropriate visitors. Decisions can be based on the patient's previous visitors and understood preferences and acceptable documentation, such as:
 - A. Advance directive information
 - B. Marital relationship/status
 - C. Existence of other legal relationship: parent-child, civil union, marriage, domestic partnership
 - D. Shared residence
 - E. Shared ownership of property or business
 - F. Acknowledgment of a committed relationship, such as an affidavit

After hours

Visitors may visit during regular visitor hours. Permission from the attending nurse is required in order to

stay beyond regular visitor hours. A visitor badge may be required for after hours visitation. Refer to [*insert name of REGION/FACILITY/MINISTRY*] procedures.

Inmates in care

For patients in custody, no visitors and calls will be accepted for inmates in care.

Infants

Infants may room-in with a hospitalized mother provided a second responsible adult also remains with the mother and infant. When needed, [*insert name of REGION/FACILITY/MINISTRY*] can provide a bedside bassinet. Hospital caregivers are not responsible for the safety, security, care, feeding, or supply needs of the infant who is not under the care of our facility.

Minor children

A legal parent or guardian is authorized to identify visitors on behalf of minor children who are patients.

Minor children visiting a patient should be accompanied by an adult at all times.

AGE-RELATED CONSIDERATIONS:

N/A

CONTRIBUTING DEPARTMENT:

- WA Council

DEFINITIONS:

- Support person: An individual who is in a support role for a patient or who is legally responsible for making health care decisions on behalf of a patient. This may include family members, friends or another individual who is there to support the patient. The role of a support person is not limited to a relationship that is legally recognized in Washington. The designation of a support person is not intended to supplant Washington law concerning the patient's legal representative.
- High-risk visitor: Includes but is not limited to a person on the hospital campus visiting patients or caregivers with a history of criminal violence or sexual abuse; or who is classified as a sexual offender or has a history of domestic violence; or who is making threats against the safety of a patient, caregiver or other representative; or a person who actively interferes with a patient's medical care.

ATTACHMENT:

N/A

OWNER:

Director of Nursing Education

Prior Policy History:

- Implementation Date: 3/2014
- Reviewed Date:
- Revision Date:

REFERENCES:

- Per WAC 246-320-141 this policy must be publicly posted on PSPH internet site, any updates must be reported to the state and updated on the internet site within 30 days of update.

ADMINISTRATIVE APPROVAL:

Chief Administrative Officer, SWSA

All revision dates:

6/6/2017, 3/1/2014

Attachments:

No Attachments

Approval Signatures

Approver	Date
Medrice Coluccio: Chief Administrative Officer, Southwest Washington [PA]	6/6/2017
Catherine Schwartz: Policy Coordinator	5/31/2017

Applicability

WA - Providence St. Peter Hospital

COPY



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Owner:	Jonathan Gazard
Policy Area:	Patient's Rights and Ethics
References:	
Applicability:	WA - Providence St. Peter Hospital

Consent for Service

Policy Number: 86100-PRE-039

PURPOSE:

To ensure that Providence St Peter Hospital (PSPH) caregivers and representatives provide and explain a Consent for Service form for our patients at each appropriate course of treatment.

APPLIES TO:

This policy applies to all members of the Providence St Peter Hospital (PSPH) workforce, including caregivers (all employees), medical staff members, contracted service providers, and volunteers.

It also applies to all vendors, representatives, and any other individuals providing services to or on behalf of Providence Southwest Washington Service Area. *All of these groups will be referenced in this policy as 'caregivers and representatives'.*

POLICY STATEMENT:

Consistent with our Mission and core values, Providence St Peter Hospital (PSPH) will take all reasonable steps to ensure the necessary consent for treatment is obtained in writing from our patients or their legal representatives

OBSERVATION & SAFETY FACTORS:

Per [WAC 246-320-141](#), this policy must be publicly posted on PSPH Internet site, any updates must be reported to the state and updated on the Internet site within 30 days of update.

PROCEDURE:

1. The Consent for Service form is provided to patients receiving care as inpatients or registered outpatients at PSPH.
 - A. Hospital caregivers and representatives will take the time to explain the form to each patient.
 - B. In every encounter, patients will be treated with compassion and respect.
2. The consent for service form includes consents, releases and agreements and becomes a permanent part of each patient's medical record.

3. Implied Consent

- A. Consent may be assumed when a patient voluntarily enters PSPH and submits to medical treatment. However, the consent for service should be still signed by the patient or legal representative.
 - 1. If someone other than the patient signs the consent for service, the relationship of the person signing is to be written/documented electronically on the form.
 - 2. If the patient is unable to provide a signature, a verbal consent is appropriate. Caregivers should document the reason for a verbal consent.

4. Emergencies

- A. In a medical emergency when a patient is unable to make an informed decision and the consent of another person qualified to represent the patient is not reasonably available, consent to treatment is implied by law and an express consent is not required. {RCW 18.71.220; RCW 7.70.050 (4)}

5. Adult Persons

- A. A person 18 years of age or older is an adult for the purpose of consenting to medical treatment, and if otherwise competent, must give his or her own consent for care at Providence St Peter Hospital. {RCW 26.28.010, RCW 26.28.015(5)}
- B. If an adult person is unable to give consent, caregivers should obtain the consent of the person authorized to give consent.

6. Minors

- A. In general, patients under the age of 18 are minors and do not have the legal capacity to consent to medical care or treatment. The consent of a parent or legal guardian is necessary, except in certain situations including but not limited to: emergency care services, treatment for mental health, substance abuse, and sexually transmitted diseases.

7. Communication

- A. Caregivers should ensure that patients are alert and oriented in order to consent to treatment or refuse it.
- B. If a patient's preferred language is not English, discussions regarding the Consent for Service form should take place in the preferred language of the patient or legal representative. Wherever possible, a professionally trained interpreter should be used. Refer to the PSPH Interpreter Services policy for further guidance.
- C. Patients with other communication barriers:
 - 1. For the sight-impaired, caregivers should read the Consent for Service form in the appropriate language.
 - 2. For the hearing-impaired, written communication or sign language through a professionally trained medical interpreter may be used.
- D. Consent by telephone should only be obtained if the person(s) with legal capacity to consent for the patient is not available in person.
 - 1. Consent by telephone should be documented on the Consent for Service form and include a reason as to why consent was provided in this way.
 - 2. Two caregivers should sign as witnesses to the consent by phone.

8. Refusal to sign Consent for Service form

- A. If a patient will not sign the Consent for Service form, caregivers should document the refusal on the form and sign as witness.
- B. The attending physician should be informed about the refusal.

AGE-RELATED CONSIDERATIONS:

Yes - see Procedure section 2D.

CONTRIBUTING DEPARTMENT/COMMITTEE APPROVAL:

WA Council

DEFINITIONS:

- Express consent: Consent to medical treatment can be given by a patient who is mentally competent or the authorized patient representative either orally, in person, by telephone or in writing.
- Competent patient: A patient who is mentally competent has the right to consent to or refuse treatment.

ATTACHMENT:

N/A

OWNER:

Manager, On-Site Access

Prior Policy History:

- Implementation Date: 3/2014
- Reviewed Date:
- Revision Date:

REFERENCES:

- [PSPH Spoken Language Interpretive Services policy](#)
- [PSPH Deaf and Hard of Hearing Interpretive Services policy](#)
- WAC 246-320-141 Patient Rights & Organizational Ethics (this policy must be publicly posted on PCH internet site, any updates must be reported to the state and updated on the internet site within 30 days of update)
- RCW 18.71.220 Rendering Emergency Care - Immunity of physician or hospital from civil liability
- RCW 7.70.050 (4) Failure to secure Informed Consent - Necessary elements of proof—Emergency situations
- RCW 26.28.010 Age of majority
- RCW 26.28.015(5) Age of majority for enumerated specific purposes

ADMINISTRATIVE APPROVAL:

Chief Administrative Officer, SWSA

All revision dates:

6/6/2017, 3/1/2014

Attachments:

No Attachments

Approval Signatures

Approver	Date
Medrice Coluccio: Chief Administrative Officer, Southwest Washington [PA]	6/6/2017
Catherine Schwartz: Policy Coordinator	5/31/2017

Applicability

WA - Providence St. Peter Hospital

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