

The University of Chicago Medical Center
Policy and Procedure Manual

Policy Name: Patient Rights and Responsibilities

Policy Number: A05-05

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Policy:

The University of Chicago Medical Center (UCMC) has an obligation to respect the rights of its patients, as described in greater detail below, and an obligation to inform all patients of such rights upon admission or as soon thereafter as the patient's condition permits. Patients also have responsibilities to other patients, UCMC staff, physicians, and other health care providers.

The University of Chicago Medical Center is committed to fostering an inclusive, diverse, and supportive healing environment for our patients, our staff, physicians, and other health care providers.

A. Patient Rights

1. No person shall be refused admission or treatment on the basis of his or her race, ethnicity, culture, language, color, age, sex, sexual orientation, gender identity or expression, physical or mental disability, socioeconomic status, national origin, marital status, veteran status, religion, or any other classification protected by applicable law.
2. Patients have the right to:
 - a. Receive quality health care, regardless of race, ethnicity, culture, language, color, age, sex, sexual orientation, gender identity or expression, physical or mental disability, socioeconomic status, national origin, marital status, veteran status, religion, or any other classification protected by applicable law, and to be treated with dignity and courtesy.
 - b. Receive foreign language or sign language interpretation or other reasonable accommodation of special needs or disabilities.
 - c. Access protective and advocacy services and receive pastoral care and/or spiritual services.
 - d. Request and participate in an Ethics consultation.
 - e. Request a second opinion or consultation from another physician as well as to transfer to another health care facility.
 - f. Receive information about diagnosis and treatment plans, in language easily understood, including the risks and benefits, and an explanation of any alternatives, to be able to make an informed decision.
 - g. Know the names and professional responsibilities of their health care team and the role they perform in their care.
 - h. Receive information about the outcomes of care, treatment and services, including unanticipated outcomes.

- i. Be informed about continuing health care requirements—such as return visits—following discharge from UCMC.
- j. Receive an explanation for, and alternatives to, a proposed transfer to another facility.
- k. Understand that he or she may receive separate bills for UCMC hospital services and the services of UCMC health care professionals and obtain a reasonable explanation of such bills, including an itemization of charges.
- l. Receive written notice of his or her rights upon admission to UCMC or as soon thereafter as practicable.
- m. Participate in the development and implementation of his or her plan of care and treatment.
- n. Provide informed consent to, or to refuse, medical treatment to the extent allowed by law. The patient does not have the right to services deemed medically unnecessary or inappropriate.
- o. Formulate advance directives (with the right to amend or revoke his or her advance directive at any time) and have UCMC staff and practitioners who provide care at UCMC comply with those directives, including end-of-life wishes. UCMC will provide the patient with information about advance directives including assistance with statutory living wills or powers of attorney.
- p. Have a family member or representative and the patient's physician notified promptly upon admission to UCMC.
- q. Participate voluntarily in research projects, with the possible risks and consequences fully explained in advance, and for which informed consent will be requested; or refuse to participate in research projects without such refusal impacting care.
- r. Receive information about pain relief measures and access appropriate pain assessment and pain management services by dedicated pain control specialists.
- s. Be free from restraints of any form that are not medically necessary or not used to prevent harm to self or others, or that are used as a means of coercion, discipline, convenience or retaliation by staff.
- t. Receive care in a safe setting, free from all forms of abuse or harassment.
- u. Have a chaperone present for any breast, genital, or rectal examinations, irrespective of the sex or gender of the person performing the examination. UCMC will also provide a chaperone for any other physical examination if requested by a patient for comfort.
- v. Have personal privacy respected and confidentiality of medical records maintained (See UCMC's Notice of Privacy Practices for details).
- w. Request restrictions or limitations on the medical information UCMC uses or discloses about the patient and to receive confidential communications from UCMC.
- x. Access his or her medical records, including current medical records, in a format requested by the patient, if it is available in such form, and within a reasonable time frame after discharge; and request amendment to his or her health information and an accounting of disclosures in accordance with applicable laws and regulations.

- y. Receive visitors, mail and telephone calls, as long as they do not interfere with treatment.
- z. File a grievance by either verbally contacting or writing to UCMC's Office

of Patient Relations, any UCMC representative or the UCMC Hospital Operations Administrator on Call (HOA) at pager 188-7500. This includes grievances by patients who have reason to believe that they have been mistreated, denied services or discriminated against because of a handicap. The patient or the patient's representative may also directly file a grievance with the Illinois Department of Public Health ("IDPH") at 525 W. Jefferson St., Springfield, IL 62761-0001, fax (217) 524-2913 or telephone (800) 252-4343. TTY- (hearing impaired use only) (800) 547- 0466; and The Joint Commission, Office of Quality Monitoring, at One Renaissance Blvd. Oakbrook Terrace, IL 60181, telephone (800) 994-6610 or email at complaint@jointcommission.org.

- aa. If the patient is a Medicare beneficiary, the patient or the patient's representative may file a grievance regarding the quality of care or coverage decisions or to appeal a premature discharge with the Illinois Foundation for Quality Healthcare (a Medicare-approved Quality Improvement Organization ("QIO")) at 1776 West Lakes Parkway, West Des Moines, IA 50266, fax (515) 223-2141, or telephone (800) 647-8089.
- bb. Consent to, or refuse to consent to, being filmed or recorded without such a decision affecting the health care received.

B. Patient Responsibilities - Patients have the responsibility to:

1. Notify a family member or representative and caregivers, upon his or her admission to UCMC, of advance directives.
2. Provide accurate and complete information about the patient's present condition and past medical history to physician.
3. Follow the treatment plan and notify physicians and nurses of changes in health status.
4. Ask questions to clarify understanding.
5. Express concerns and /or disagreement with health care recommendations and accept responsibility for health care decisions.
6. Ask for pain relief intervention when pain first begins and discuss pain management options to assist in development of a pain management plan.
7. Keep appointments for follow-up care or to notify the clinic in advance if a cancellation is necessary.
8. Be considerate of other patients; respect their privacy and property.
9. Provide UCMC with complete and accurate financial information and comply with agreed-upon payment arrangements.

C. Similarly, and in the spirit of mutual trust and respect, the University of Chicago Medical Center will not honor requests from patients or their family members that a member of the health care team be changed or assigned where that request is based on discriminatory bias against the member's legally protected characteristics. Legally protected characteristics include race, ethnicity, culture, language, color, age, sex, sexual orientation, gender identity or expression, physical or mental disability, socioeconomic status, national origin, marital status, veteran status, religion, or any other classification protected by law.

- a. The Medical Center will consider requests for a change in provider in limited circumstances relating to the patient's own legally protected characteristics (including, for example, in matters of reproductive/sexual health and/or matters involving a patient's sincerely held religious beliefs) and/or when receiving care from a provider of a particular gender may cause the patient discomfort. Decisions whether to honor a request of this type will be made on a case-by-case basis and consistent with applicable law. No request will be honored if it is based on discriminatory bias against legally protected characteristics.
- b. Note: This policy applies to patients and their family members seeking treatment within the Medical Center, including in the inpatient setting as well as in the outpatient care setting (*e.g.*, X rays, treatments in clinics, *etc.*). It is not intended to extend to the choice exercised by patients in making appointments and establishing ongoing physician/patient relationships with outpatient care physicians (including, for example and without limitation, primary care physicians, obstetricians/gynecologists, *etc.*).
- c. The Medical Center will offer to arrange transfer of the patient to another hospital or provider organization in situations where a patient and/or the patient's family members have made a discriminatory request as described above and will not, after reasoned discussion with representatives of the Medical Center, agree to receive care from the assigned member of the health care team, provided the patient is medically stable.

REFERENCES:

1. Informed Consent for Procedures and Treatment, Administrative Policy 02-01/Patient Care Policy 13
2. Release of Information and Emergency Release, Administrative Policy 02-02
3. Media and Telephone Inquiries, Administrative Policy 02-09
4. Consent to Photograph, Administrative Policy 02-11
5. Inpatient Admission Policy, Administrative Policy 03-01
6. Organ and Tissue Donation, Administrative Policy 03-02/Patient Care Policy 21
7. Hospital Transfers, Administrative Policy 03-03
8. Do Not Resuscitated Orders (DNR) –Inpatient Treatment Limitation, Patient Care Policy 05
9. Discharge of a Patient Against Medical Advice, Administrative Policy 08-22
10. Advance Directive--Living Will, Administrative Policy 08-15
11. Patient Discharge and Transfer, Administrative Policy 08-21
12. Patient Self Determination Act Implementation, Administrative Policy 03-11
13. Advance Directive--Durable Power of Attorney for Health Care, Administrative Policy 08-17
14. Health Care Surrogates, Administrative Policy 08-18
15. Emergency Department Resource Limitation/Ambulance Diversion, Administrative Policy 04-01

16. Emergency Medical Screening, Patient Care Policy 08
17. Translator and Interpreter Services, Administrative Policy 05-02
18. Spiritual and Religious Needs of Patient, Administrative Policy 05-03
19. Patient Complaints and Grievances, Administrative Policy 05-09
20. Restraints and Seclusion Policy, Patient Care Policy 27
21. **Nursing Manual** - See also Nursing Policy and Procedure Manual distributed by Patient Services.
22. **Patient Care Manual** - See also Patient Care Policy and Procedure Manual distributed by the Medical Staff Office.
23. Advancing Effective Communication, Cultural Competence, and Patient- and Family Centered Care – A Roadmap for Hospitals (<http://www.jointcommission.org/assets/1/6/aroamapforhospitalsfinalversion727.pdf>) – The Joint Commission (pg. 61)
24. Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community – A Field Guide (<http://www.jointcommission.org/assets/1/18/LGBTFieldGuide.pdf>) – The Joint Commission (pg.48)
25. Committee Opinion Number 796 *Sexual Misconduct*. American College of Obstetricians & Gynecologists (<https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2020/01/sexual-misconduct#>)

Interpretation, Implementation and Revision

The Office of Legal Affairs is responsible for the revision and interpretation of this policy. Health care providers are responsible for the implementation of this policy.

Tom Jackiewicz, President