**GUIDELINES** FOR PATIENTS AND COMPANIONS



# **RIGHTS OF PATIENTS AND COMPANIONS**

#### **1. PURPOSE**

Establish processes that support the rights, duties, and responsibilities of patients and their family members.

### 2. COVERAGE

Institutional.

# **3. DESCRIPTION**

The rights of patients and their family members are the key to all contacts between the hospital, its staff, and patients and their family members.

The institution recognizes its responsibility to develop and implement guidelines that protect and ensure the rights and responsibilities of patients and their family members. Based on the laws, statutes, and regulations in force, supported by the values of its Code of Ethics, it adopts the statement below as a guide for the processes identified as the rights and responsibilities of its users.

According to legislation, a child is considered a person up to 12 years old, an adolescent is between 12 and 18 years old, and an older adult is a person at 60 years old or older. When any right is affected or any responsibility is not fulfilled, the hospital leader must ensure its suitability as the representative of the institution.

## 4. DESCRIPTION

#### **Rights of Patients and Family Members**

**1.** Receive dignified, attentive, and respectful care, without any prejudice or discrimination, restriction or denial due to age, race, color, ethnicity, religion, sexual orientation, gender identity, economic or social conditions, health status, anomaly, pathology or disability.

2. Be identified by full name and date of birth and addressed by their registered name or social name, as they prefer, and not in a generic manner, or by the name of their disease, number, code, or any other disrespectful or prejudiced way.

**3.** Be able to identify professionals through visible, legible badges and/or other easily perceived forms of identification.

**4.** Receive information about the institution's protection rules regarding their personal belongings.

**5.** Receive clear, simple, and understandable information from the staff who is assisting them, adapted to their cultural condition, regarding their diagnosis, therapeutic options, and risks involved.

**6.** Receive information about medications that will be administered, as well as the origin of blood and blood products before receiving them, having the right to refuse them, certified in the presence of a witness.

7. Receive adequate hospital care to control and/or minimize physical pain according to the institution's guidelines or clinical protocols.

8. Consent or refuse – after receiving adequate information
– diagnostic, preventive, or therapeutic procedures, except
in cases that pose a risk to public health.

**9.** Indicate, by their free choice, to whom they will entrust the decision-making in the event of becoming unable to exercise their autonomy, including with regard to treatments, care, procedures, and measures of resuscitation or other life-sustaining care (applicable to persons over 18 years of age or legally emancipated).

**10.** Have access to their medical record according to current legislation and in accordance with the institution's rules. The medical record must include a set of standardized documents and information about the patient's history, principles and progression of the disease, therapeutic procedures, and other clinical notes.

**11.** Have safeguarded the secrecy and confidentiality of any and all information, even after death, except in cases of risk to public health.

**12.** Receive or refuse religious, psychological, and social assistance.

**13.** Have their spiritual and religious beliefs respected, as well as their ethical and cultural values.

**14.** Have guaranteed the preservation of their image, identity, privacy, physical, mental, and moral integrity regardless of their state of consciousness.

**15.** Have the right to a companion of their choice during consultations and exams and during hospitalization, in the cases provided for by law, as well as in those where the person's autonomy is compromised, in accordance with the institution's rules.

**16.** Participate in all decisions about their assistance, with the guarantee that the staff who is assisting them will provide information and clarifications about questions, results regarding assistance and treatment, as well as unforeseen results.

**17.** Request a second opinion or opinion from another professional, as well as the replacement of the physician responsible for their care, at any stage of treatment, in accordance with the institution's policy.

**18.** Have respectful and compassionate assistance at the end of their life and be treated with dignity and respect after their death and have no organs removed from their body without prior authorization from the patient, their family or legal responsible person.

**19.** Express and be heard in their complaints, reports, needs, suggestions, and other manifestations through the Ombudsman and any other existing mechanism, being respected in their privacy and confidentiality.

# **Special situations**

**1.** Assure children, adolescents, individuals with special needs and older adults their rights in accordance with the current legislation and institutional policy.

**1.1** If a child or adolescent:

• have their mother or father as the responsible person for decisions and interests.

 maintain the continuity of school activities, as well as encouraging recreation.

**1.2** If a newborn:

• not to be separated from their mother at birth, except when the newborn or the mother needs special care.

• receive exclusive breastfeeding, except when it poses a risk to the health of the mother or newborn.

1.3 If an older adult:

•ensure the right to a companion and provide adequate conditions for their full-time stay, according to medical criteria.

•ensure comprehensive care, especially for diseases that affect older adults preferentially.

Note: People with disability are those who have a longterm physical, mental, intellectual, or sensory impairment, which, in interaction with one or more barriers, may obstruct their full and effective participation in society on equal terms with other people.

# RESPONSIBILITIES AND DUTIES OF PATIENTS AND FAMILY MEMBERS

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**1.** Provide complete and accurate information about their health history, previous illnesses, use of medications or substances that cause drug dependence, past medical procedures and other problems related to their health.

2. Follow the instructions recommended by the multidisciplinary team who is assisting the patient, being responsible for the consequences of their refusal.

**3.** Know and respect the rules and regulations of the Hospital.

**4.** Take care and be responsible for the institution's facilities and assets placed at their disposal.

**5.** Respect the rights of other patients, employees and service providers of the Institution, treating them with civility and courtesy, contributing to the control of noise, amount and behavior of visitors.

6. Be responsible for any and all expenses incurred during hospitalization and/or outpatient care or appoint the legal and financial responsible person for their hospital treatment, informing the Hospital of any changes in such appointment.

**7.** Respect the prohibition of smoking, extending it to their companions and visitors, in accordance with current legislation.

8. In the case of children, adolescents and adults considered incapable, the responsibilities listed above must be exercised by their duly authorized legally responsible person.

At the time of hospital admission, the patient and/or their responsible family member are offered a guide with information about the hospital's services and operation, which contains the complete list of Rights and Responsibilities.Such list can also be easily accessed on information boards distributed in visible places, both for employees and for patients and family members.

When any right is affected or any responsibility is not fulfilled, the Hospital leader will seek to ensure its suitability as the representative of the institution. Ultimately, both patients and family members, as well as the institution itself, have the help of the Ombudsman, which will interface between both.

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BRAZIL. Ordinance No. 1.820, of August 13, 2009. Provides for the rights and duties of users of healthcare. Ministry of Health.

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FENAPAE, 2007. International Classification of Functioning, Disability and Health (ICF): World Health Organization, translation and edition by Edusp, São Paulo, 2003.

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