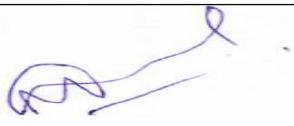


**This document is a part of Livasa Hospital Policies and SOPs Documents**

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**Issue No-10**

**Issue Date- 01.03.25**

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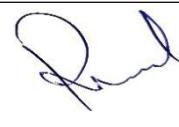
**NABH Guidebook Reference-**

- PRE.2.a- Commitment
- PRE.2.b- Commitment
- PRE.2.c- Commitment
- PRE.2.d- CORE
- PRE.2.e- Commitment
- PRE.2.f- Commitment
- PRE.2.g- CORE
- PRE.2.h- Commitment
- PRE.2.i- Commitment
- PRE.2.j- Commitment
- PRE.2.k- Commitment

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|---|---|---------------------|---------------------|
| <b>Reviewed by-Quality Cell</b>   | <b>Approved by- Medical Director</b>  | <b>Issue No. 10</b> | <b>Page 1 of 10</b> |
|  |  |                     |                     |

- PRE.2.1- Achievement

**Livasa<sup>TM</sup>  
Hospital, Mohali**

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|---|---|--------------|--------------|
| Reviewed by-Quality Cell  | Approved by- Medical Director   | Issue No. 10 | Page 2 of 10 |
|  |  |              |              |

**PURPOSE:** To define patient and family rights in a manner that it supports individual belief, values and to ensure patient and family are involved in decision making.

**SCOPE:** Hospital wide

**STANDARD:** Patient and family rights support individual beliefs, values and involve the patient and family in decision-making processes.

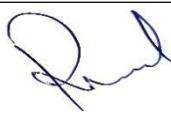
**OE PRE.2.a.**

**Objective Element: Patient and Family rights include respecting values and beliefs, any special preferences, cultural needs and responding to requests for spiritual need.**

The identification of the unique needs of patients and family and rendering complete support and helping in meeting the religious/ spiritual /cultural needs of patients and their families if needed is done by the Livasa Hospital staff. The Patient can wear appropriate personal clothing and religious or other symbolic items, as long as they do not jeopardize safety or interfere with diagnostic procedures or treatment.

It also include considering dietary preferences, within the type of diet recommended by the dietician, special diet request can be entertained from the patients.

Religious and worship requests are also entertained, ensuring it is not disturbing other patients and not harming the patients and ensuring all infection control and prevention guidelines are followed during any of the cultural or religious activity especially at the time or after the death of a patient.

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|---|---|---------------------|---------------------|
| <b>Reviewed by-Quality Cell</b>   | <b>Approved by- Medical Director</b>  | <b>Issue No. 10</b> | <b>Page 3 of 10</b> |
|  |  |                     |                     |

**OE PRE.2.b.**

**Objective Element: Patient and Family rights include respect for personal dignity and privacy during examination, procedures and treatment.**

**Respect and dignity:** The patient has the right to considerate, respectful care at all times and under all circumstances, with recognition of his personal dignity and worth

**Privacy and confidentiality:** The patient has the right, within the law, to personal and informational privacy:

- Refuse to talk with or see anyone not officially connected with the hospital, including visitors, persons officially connected with the hospital but who are not directly involved in his care.
- Wear appropriate personal clothing and religious or other symbolic items, as long as they do not jeopardize safety or interfere with diagnostic procedures or treatment.
- Be interviewed and examined in surroundings designed to assure reasonable audiovisual privacy. This includes the right to have a person of one's own gender present during certain parts of a physical examination, treatment, or procedure performed by a health professional of the opposite sex; and the right not to remain disrobed any longer than is required for accomplishing the medical purpose for which the patient was asked to disrobe.
- Expect that any discussion or consultation involving his / her case will not be conducted discreetly and that individuals not involved in direct care will not be present without permission of the patient.
- Have his/ her medical record read only by individuals directly involved in treatment or monitoring of quality, and by other individuals only on written authorization by the patient or that of his / her legally authorized representative.
- Expect that all communications and other records pertaining to his care, including the source of payment for treatment, be treated as confidential.

- Expect that information given to concerned family members or significant other legally qualified person, be delivered in privacy and with due consideration of confidentiality.
- Request transfer to another available room if another patient or visitors in that room are unnecessarily disturbing to the said patient.
- All the patient documents be placed under the charge of Shift-in-Charge nurse and accessible only to authorized personnel so as to avoid any possible misuse.

#### **OE PRE.2.c**

**Objective Element: Patient and family rights include protection from physical abuse and neglect.**

Patient is protected from physical abuse and neglect.

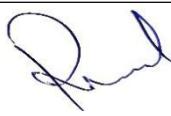
“**Vulnerability**” is operationally defined as the potential risks associated with the physical and mental status of an individual, which might reasonably be anticipated irrespective of the context in which care is provided.

Be interviewed and examined in surroundings designed to assure reasonable audiovisual privacy. This includes the right to have a person of one’s own gender present during certain parts of a physical examination, treatment, or procedure performed by a health professional of the opposite sex; and the right not to remain disrobed any longer than is required for accomplishing the medical purpose for which the patient was asked to disrobe.

#### **OE PRE.2.d**

**Objective Element: Patient and family rights include treating patient information as confidential.**

- Any discussion or consultation involving his / her case will not be conducted discreetly and that individuals not involved in direct care will not be present without permission of the patient.

| Reviewed by-Quality Cell  | Approved by- Medical Director   | Issue No. 10 | Page 5 of 10 |
|---|---|--------------|--------------|
|  |  |              |              |

- Confidential information including HIV status, MTP (as per the act), Patients of infectious diseases shall not be revealed without patient's permission. These information shall not be pasted on the cover of the medical record nor shall be displayed in any manner that is easily understandable in public at large.
- Patient's medical record can only be read by individuals directly involved in treatment or monitoring of quality, and by other individuals only on written authorization by the patient or that of his / her legally authorized representative.
- Statutory requirement regarding privileged communication shall be followed all the time. Privileged communication is confidential information furnished (to facilitate diagnosis & Treatment) by the patient to a professional authorized by law to provide care and treatment. No such information shall be discussed by hospital staff with any one except with the intent of treatment and care.

#### **OE PRE.2.e**

**Objective Element: Patient and family rights includes refusal of treatment.**

The patients are given the choice of treatment. The treating doctor discusses all the available options and allows the patient to make an informed choice including the option of refusal. In case of refusal, the treating doctor explains the consequences of refusal of treatment and documents the same. After explanation of the consequences, if the patient still refuses treatment, the same is respected

#### **OE PRE.2.f**

**Objective Element: Patient and family have a right to seek an additional opinion regarding clinical care.**

If any patient and family want to seek second opinion from within or outside the organization the same can be sought. Patient can be given all the clinical reports and records

| Reviewed by-Quality Cell  | Approved by- Medical Director   | Issue No. 10 | Page 6 of 10 |
|---|---|--------------|--------------|
|  |  |              |              |

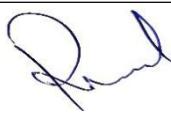
whichever is sought by the patient. Posters regarding the Rights of Patient in English, Hindi and Punjabi are displayed throughout the Hospital (In all clinical areas). Patient can request a nurse or GRO to get the record and other relevant information and same will be arranged accordingly by staff.

**OE PRE.2.g**

**Objective Element: Patient and family rights include informed consent before transfusion of blood and blood components, anaesthesia, surgery, initiation of any research protocol and any other invasive/high risk procedures/treatment.**

**Consent:**

- The patient has the right to reasonably informed participation in decisions involving his / her healthcare. To the degree possible, this shall be based on a clear, concise explanation of his / her condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success. The patient shall not be subjected to any procedure without his / her voluntary, competent, and informed consent, or that of his / her legally authorized representative. Where medically significant alternatives for care or treatment exist, the patient shall be so informed.
- The patient has the right to know who is responsible for performing the procedures or treatment.
- The patient may refuse treatment. When refusal of treatment by the patient or his / her legally authorized representative prevents the provision of appropriate care in accordance with ethical and professional standards, the relationship with the patient may be terminated upon reasonable notice.
- If a patient is unconscious or is determined to be mentally incompetent, consent shall be obtained from an appropriate family member. In life-threatening emergencies where the patient is incompetent, or unconscious, appropriate treatment may be administered without consent of the patient and in such cases consent by two doctors will suffice.

| Reviewed by-Quality Cell  | Approved by- Medical Director   | Issue No. 10 | Page 7 of 10 |
|---|---|--------------|--------------|
|  |  |              |              |

#### **OE PRE.2.h**

**Objective Element: Patient and family rights include right to complain and information on how to voice a complaint.**

The patient has the right to file a complaint regarding services and is entitled to information regarding the hospital's mechanism for the initiation, review and resolution of such complaints. Patients can complain by

- Complaint register kept at the Reception/Front desk counters
- Feedback form available in OPD as well for IPD patients
- SMS Feedback
- Directly to OPD / IPD GROs visiting and available in the units
- Hand written complaint or a feedback form can also be put in the drop in box available in OPDs and reception.

All this information is also displayed at various prominent locations in the hospital.

#### **OE PRE.2.i**

**Objective Element: Patient and family rights include information on the expected cost of treatment.**

The patients and /or family members are explained about the expected costs. The patient / family members are given an approx estimate for the proposed treatment by the doctor with the help of counselor / admission staff. The estimate given is an approximate as the plan of treatment might vary sometimes. The patient, at his/her own request and expenses, has the right to consult with any consultant.

#### **OE PRE.2.j.**

**Objective Element: Patient and family rights include access to his/her clinical records.**

Organization has a system in place for the access of medical records.

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|---|---|---------------------|---------------------|
| <b>Reviewed by-Quality Cell</b>   | <b>Approved by- Medical Director</b>  | <b>Issue No. 10</b> | <b>Page 8 of 10</b> |
|  |  |                     |                     |

- a. In case a patient / legal heir wants a copy of medical records, a written application is to be submitted along with signature mentioning the records required and the reasons for the request.
- b. The application has to be submitted in the medical administrator office.
- c. The photocopy of the records is provided to them and a receiving note along with their signature is taken on the application, which is attached to the patients file.

#### **OE PRE.2.k**

**Objective Element: Patient and family rights include information on the name of the treating doctor, care plan, progress and information on their health care needs.**

Patient has full right to know about the name of the treating consultant. Treating consultant also introduce himself/herself at the time of their first meeting and also meets the patient regularly while patient is admitted.

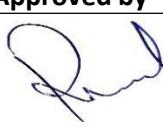
Information on plan of care, progress and information on their health care needs are given to the patients.

- a. The patient has the right to obtain from the Senior Consultant / Consultant responsible for coordinating his / her care, complete and current information concerning his / her diagnosis (to the degree known), treatment and any known prognosis. This information should be communicated in terms the patient can reasonably be expected to understand.
- b. The patient has the formal right of access to his / her medical records. The Senior Consultant / Consultant shall be notified when such requests are made.

#### **OE PRE.2.l**

**Objective Element: Patient right include determining what information regarding their care would be provided to self and family.**

In case of patient conscious oriented and Adult- Patient determines what information he / she want to share with family. Patient is given all the information relevant and to be known to the patient. All the sensitive information regarding the revealing of the critical disease,

| Reviewed by-Quality Cell  | Approved by- Medical Director   | Issue No. 10 | Page 9 of 10 |
|---|---|--------------|--------------|
|  |  |              |              |

prognosis etc can directly be discussed with the patient only. Only after the approval of patient same shall be discussed and revealed to kin or attendant. However if the treating clinician believes that revealing such sensitive information directly to the patient can be detrimental for his or her health and prognosis, the same can be discussed with next adult kin.

In case of Minors or mentally unstable/unconscious patients, it will be provided to at least one of the parent/guardian.



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| <b>Reviewed by-Quality Cell</b> | <b>Approved by- Medical Director</b> | <b>Issue No. 10</b> | <b>Page 10 of 10</b> |
|                                 |                                      |                     |                      |