


POLICIES AND PROCEDURES

	TITLE Patient Rights, Nondiscrimination and Anti- Harassment	POLICY NUMBER RI 6.0
REVISION DATES 11/18/24 REVIEW CYCLE <input checked="" type="checkbox"/> 2 years LAST REVIEW DATE:	CATEGORY <input type="checkbox"/> Clinical <input type="checkbox"/> Management <input checked="" type="checkbox"/> Regulatory	EFFECTIVE DATE 11/10/22
LEVEL: <input checked="" type="checkbox"/> System <input type="checkbox"/> Department:	REPLACES	

PURPOSE

One Brooklyn Health (OBH) respects the rights of patients and is committed to providing a healthcare environment in which all patients are treated with respect and dignity. Each patient is an individual with unique health care needs and has the right to receive health care in an atmosphere that prohibits discriminatory practices, including harassment. The organization affirms the patient’s rights to make decisions regarding their health care, which includes consideration of the psychosocial, spiritual and cultural variables that influence the perception of illness. The patients shall have equitable and humane treatment at all times and under all circumstances, and all relationships between employees of the hospital and patients will be free of bias, prejudice and harassment.

POLICY STATEMENT

OBH is committed to non-discrimination practices and care. OBH prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression. No person shall be denied impartial access to treatment or accommodations available because of disability, race, color, creed, national origin, the nature of the source of payment for their care, gender, sexual orientation, gender identity or gender expression, (the patient’s preferred gender will be respected, and the patient will be referred to by their name and pronoun of choice), or other non-medically relevant factor or any other characteristic protected by federal or state law.

Any such discrimination or harassment is prohibited and will not be tolerated. This applies to admission, treatment, discharge or other participation in any of the hospital's programs, services or activities, including, but not limited to: patient admissions; inpatient, outpatient or emergency care; room, floor or section assignments or transfers (except in those cases where patient safety or health condition is a necessary consideration); and employee assignments to patient services. The rights of patients shall also apply to the neonate, child and adolescent patient. The rights of minor patients shall include the parents and/or guardian of these patients.

Hospital and Medical Staff Leadership are responsible for doing all they can to ensure that no patient

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is subject to conduct which constitutes discrimination or harassment. The hospital will investigate all allegations of non-compliance and take action as needed.

DEFINITIONS

- A. **Gender expression** - the way a person expresses gender through dress, grooming habits, mannerisms and other characteristics.
- B. **Gender identity** - an individual's inner sense of being male, female or another gender; gender identity is not the same as sex assigned or presumed at birth.
- A. **"Harassment/Harassing Conduct"** is a verbal or physical conduct that denigrates or show hostility or aversion towards a patient because of his/her race, color, religion, sex, gender identity or expression, national origin, age, disability, citizenship, marital status, creed, sexual orientation, or any other characteristics protected by law, or that of his/her relatives, friends or associates and that (i) has the purpose or effect of creating an intimidating, hostile or offensive environment; (ii) has the purpose or effect of unreasonably interfering with an individual's dignity; or (iii) otherwise adversely affects an individual's healthcare. It includes, but is not limited to: epithets, slurs or negative stereotyping; threatening, intimidating or hostile acts, and denigrating jokes. This list is for purposes of illustration and is not intended to be exhaustive
- B. **"Sexual harassment"** constitutes discrimination and a violation of federal, state and local laws. Sexual harassment may include a range of subtle and not so subtle behaviors and may involve individuals of the same or different gender. Depending on the circumstances, these behaviors may include, but are not limited to: unwanted sexual flirtation, advances or requests for sexual favors; subtle or overt pressure for sexual favors; sexual or sexist jokes, innuendoes, advances or propositions; verbal abuse of a sexual nature; commentary about an individual's body, sexual habits, sexual prowess or sexual deficiencies; leering, whistling, touching, pinching, assault or coerced sexual acts; suggestive, insulting or obscene comments or gestures: display or circulation, including through e-mail, of sexually suggestive material, objects or pictures; or other physical, verbal or visual conduct of a sexual nature.
- C. **Patient Responsibilities** – Consistent with the state law, the patient (and/or legal representative as appropriate) has the following responsibilities:
1. To be considerate and respectful when interacting with staff
 2. To take an active role in making decisions about care, treatment, and services by doing the following:
 - Discussing condition and treatment with the practitioner
 - Reporting any changes to condition
 - Providing advance directive and/or expressing wishes regarding use of life support
 3. To inform staff of all information that may affect care and safety

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PROCEDURE

A. PATIENT'S RIGHTS:

1. The patient shall have the right to privacy and confidentiality during medical treatment or other rendering of care within the hospital, which shall be protected by the hospital and the attending physician without regard to their disability, race, color, creed, gender, sexual orientation, gender identity or gender expression, national origin, economic status or the source of payment for their care. Individuals not involved in the patient's care will not be permitted access to the patient or their healthcare information in any manner.
2. The patient's privacy and individual dignity shall be maintained in all areas of examination and treatment within the hospital.
3. The patient has the right to competent, considerate and respectful care in a safe setting that fosters the patient's comfort and dignity and is free from all forms of abuse and harassment, including abuse or harassment based on gender identity or gender expression.
4. The confidentiality of the patient's disclosures, within the law, shall be accorded the patient. This right of confidentiality shall include the right of the patient to decide to participate in the clinical training programs and/or the gathering of data for research purposes.
5. Patients have the right to refuse to be examined, observed or treated by medical students, residents or any other hospital staff when the primary purpose is educational or informational rather than therapeutic, without jeopardizing the patient's access to medical care.
6. The patient has the right to know from those responsible for their care:
 - The name and position of the physician who is primarily responsible for their care.
 - Know the names, positions and functions of any hospital staff involved in their care and be able to refuse their treatment, examination or observation.
 - Receive complete information about their diagnosis, treatment and prognosis.
 - Alternatives for care or medical treatment where medically significant.
 - Receive all the information needed to give informed consent for any proposed procedure or treatment. This information will include the possible risks and benefits of the procedure or treatment.
 - Right to participate in ethical issues that may arise in the provision of their treatment.
 - Receive all the information needed to give informed consent for an order not to resuscitate as well as the right to designate an individual to give consent for them if they are too ill to do so.
 - The probable duration of the hospital stay.
 - Receive adequate instruction in self-care in the interim between visits to the hospital or to the physician.
7. Communication between the patient and the physician or the hospital must accommodate, where possible, the ethnic, cultural and language variation of the patient.
8. In compliance with the Patient Self-Determination Act of 1990:
 - Adult patients have the right to control the decisions relating to the rendering of their own medical care, including the right to accept or refuse medical or surgical treatment (and to be informed of the possible medical outcomes of their action) and have the right to

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- formulate advance health care directives.
- To have a surrogate decision maker if the patient is unable to make decisions on his or her own. The surrogate decision maker has the right to refuse care, treatment, and services on the patient's behalf.
 - To have family involved in decision making about care, treatment, and services.
 - No patient shall be discriminated against or have care conditioned on whether or not advance health care directives have been executed.
9. The patient has the right to expect the following from the hospital:
- A reasonable response to their request for services within the capacity of the hospital.
 - An explanation of their bill regardless of the source of payment and to receive information or be advised of the availability of sources of financial assistance, if any.
 - OBH will not discriminate in the provision of health care services to an individual:
 - Because the individual is unable to pay for the health care services;
 - Because payment for those services would be made under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP);
 - To be informed concerning hospital rules and regulations applying to their conduct as a patient.
 - Access to their medical record information within the limits and specific provisions of applicable law.
 - Information about the hospital's mechanisms for initiation and resolution of patient complaints or conflicts.
10. To be informed of visitation rights, including:
- Right to receive visitors, according to the patient's wishes and consent
 - Right to withdraw or deny consent for visitors
11. To have a family member, a friend, or another individual present for emotional support during the patient's stay
12. No patient shall be discriminated against based on any disabilities as set forth in the Americans with Disabilities Act.
13. A copy of the Patient's Bill of Rights will be provided to all patients and will also be posted in accessible areas throughout the hospital. The Bill of Rights is available in English and other languages. Interpreters are available as needed.
14. The organization acknowledges the need for a balance between outside communication during a patient's stay and the need for sustained periods of quiet for restorative purposes. Visiting hours will be posted for specific departments.
15. The organization asks the patient on registration how they would like to be addressed (i.e. a number or first or last name).
16. Pastoral services will be available for the spiritual needs for all patients.
17. The hospital must provide interpreting and translating services as needed, at no cost to the patient.
18. The hospital communicates with the patient who has vision, speech, hearing or cognitive impairments in a manner that meets the patient's needs.

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19. The hospital honors the patient's right to give or withhold informed consent to produce or use recordings, films, or other images of the patient for purposes other than their care.
20. The hospital protects the patient and respects their rights during the research, investigation, and clinical trials.
21. The patient has the right to be free from neglect, exploitation; and verbal, mental, physical, and sexual abuse.
22. The patient has the right to an environment that preserves dignity and contributes to a positive self-image.

B. COMPLAINTS:

1. If any patient, or their representative, believes that the patient has been discriminated against or harassed, they may file a complaint with the Patient Representative Department.
2. Staff who believe they have witnessed discrimination or harassment have an obligation to bring this to the attention of their immediate supervisor or Department Head. The hospital urges the prompt reporting of such occurrences. Complaints will be investigated promptly and thoroughly.
3. Confidentiality will be maintained to the extent permitted by law and consistent with the Hospital's obligations to investigate complaints and take appropriate corrective action.
4. Complaints about discrimination and harassment committed by non-employees (for instance, independent contractors or outside vendors) will be handled in the same manner. Such complaints will be investigated, and appropriate action will be taken.

C. RETALIATION IS PROHIBITED

Retaliation against an individual who reports discrimination or harassment or provides information relevant to such reports is strictly prohibited and will be treated as a serious violation of this policy.

RESPONSIBILITY

The Chief Patient Experience Officer is responsible for reviewing this policy every 2 years or more frequently if deemed necessary.

REFERENCES

1. New York State Department of Health, Code 405.7
2. Management of Room Assignment of Transgender Patient
3. Visiting Hours, Regulations and Restrictions Policy
4. The Joint Commission: Hospital Accreditation Standards: 2009. Rights and Responsibilities of the Individual.
5. National Center for Transgender Equality
6. Management of Assignment of Transgender Patient Policy
7. Patient Non-Discrimination and Anti-Harassment Policy
8. Visiting Hours, Regulations and Restrictions Policy