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|  | MTI-HAYATABAD MEDICAL COMPLEX   | Doc. Code   | HMC-OPD-MAN-01 |
|   | DEPARTMENTAL OPERATIONAL MANUAL | Version No. | 00             |
|   | OUTPATIENT SERVICES MANAGEMENT  | Date        | 02-05-2022     |

## GUIDELINE # 1: PATIENT'S RIGHTS AND RESPONSIBILITIES

### 1. PURPOSE

The purpose of this policy is to provide guidance to the staff and patients on the rights and responsibilities of patients, as well as on the duty of staff to educate patients in line with their needs and in a manner relevant to their clinical condition.

### 2. SCOPE

This procedure is applicable to all registered patients of MTI-HMC

### 3. RESPONSIBILITIES

| Actor                                      | Role / Responsibilities                                    |
|--|--|
| <b>Medical Director</b>                    | Approval of decisions related to clinical matters          |
| <b>Hospital Director</b>                   | Approval of decisions related to general management of OPD |
| <b>Managers OPD and IBP</b>                | Implementation of Policies and procedures                  |
| <b>Clinics attendants</b>                  | Operational workforce                                      |
| <b>Chairman and HODs of clinical units</b> | Clinical services and scheduling                           |

### 4. POLICY / GUIDELINES DESCRIPTION

MTI-HMC believes that the protection and support of the patient's rights are vital for the well-being of our patients, and those patients and their families also have certain responsibilities regarding the healthcare they receive. These rights and responsibilities are communicated to every patient at the time of their first encounter with the institution.

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#### 4.1 RIGHTS OF THE PATIENT

##### 4.1.1 ACCESSIBILITY

- We will provide the best possible care available to patients regardless of age, gender, ethnic background, religion or financial means.
- Staff members will be trained on policies, procedures and their role in supporting patient and family participation in care processes.
- We will provide proper guidance to patients seeking financial assistance in connection with their care and treatment at MTI-HMC. Such financial assistance is subject to the availability of resources in the institution and as per-existing institutional policies.

##### 4.1.2 COMMUNICATION AND PATIENT EDUCATION

- Patients will be informed of their rights in a manner they can understand. In addition, other relevant information such as the mechanism to lodge a complaint, make a suggestion, obtain an ethics consult, etc. will be provided to the patient and/or family.
- An educational assessment will be made according to the needs of the patient within the perspective of the clinical service.
- The educational needs assessment will include the patient and family's needs, as appropriate, learning abilities, preferences and readiness to learn. The assessment will also include consideration of cultural, physical, financial influence and linguistic abilities of learning.
- The planning and provision of education will be based on an interdisciplinary approach.
- Learning needs should be documented in the medical records.
- Documentation of patient/family education and response to education should be carried out in such a way that all care providers can access it easily.
- At discharge, each patient will be provided with a discharge summary. A full clinical summary can be provided on request, free of cost.

##### 4.1.3 PATIENT CARE

- The hospital will provide health care services to the patient's need keeping in mind the privacy and confidentiality. The patient remains the primary decision maker regarding his/her diagnosis and treatment and access to this information. The patient may decide to nominate another person to represent him/her in making such decision.
- The organization will make a reasonable effort to be considerate of the cultural and religious values and beliefs of patients. Staff members will be educated about patient rights and will ensure protection of those as their responsibility.
- As part of the nursing assessment, individual religious/spiritual needs are explored and documented. Patients are advised to contact the bed manager to discuss routine as well as complex spiritual needs as and when necessary.
- All care provided to the patient will ensure that the patient's beliefs, values and dignity is protected as far as reasonably possible.
- Patients admitted to the hospital will be seen at least once a day by a consultant physician/surgeon.

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- In the outpatient setting, the patient will be seen by a consultant physician/surgeon (or by a fellow in a fellow-led clinic) at each visit.
- A patient's need for privacy will be respected for all clinical interviews, examinations, procedures/ treatments, and transport.
- The patient or its legally appropriate representative has the right to decide their extent of participation in the care process including evaluating, planning and delivery of appropriate treatment.
- The treating physician/surgeon will be responsible for discussing the proposed treatment plan, available alternatives, possible unanticipated outcomes and any subsequent changes to this plan, and documenting all relevant discussion.
- The patient/legally appropriate representative has a right to seek additional information about the doctor responsible for their care. In the first instance, such enquiries should be directed to the primary consultant.
- Informed consent will be sought from every patient (or their legally appropriate representative) undergoing treatment procedure according to the hospital's policy.
- The patient or their legally appropriate representative has a right to refuse treatment and to seek discharge. We will advise the patient of the medical consequences of such a decision. However, the hospital will not be responsible for any consequences resulting from such a decision on the part of the patient or their legally appropriate representative.
- When a patient is dissatisfied with treatment, he/she may voice his concerns through the established complaint mechanism.
- Patient/family can request a change in his/her treating physician/surgeon for any reason, with the approval of the existing consultant and the Medical Director.
- All possible support will be provided to any patient being considered for transfer to an alternate treatment facility.
- We will provide appropriate protection to identified vulnerable patients during care.
- We will provide respectful and compassionate care at the end of life.
- The hospital management will ensure adherence to all applicable regulations and laws

#### 4.2 PATIENT'S COMPLAINTS / SUGGESTIONS

While it is our objective to provide the best possible care and service, we recognize that patients/families are not always satisfied. In case of a complaint, or in order to make a suggestion, the patient or their legally appropriate representative should speak directly to the Manager/team leader assigned to their care in the first instance.

If the issue is not resolved, the patient or their legally appropriate representative may make a formal complaint in writing by filling in the Comment Card that is available at all service counters, and deposit it in the complaint/suggestion boxes available at several locations throughout the hospital.

All complaints are acknowledged within two working days, and a formal response provided within 12 working days.