PATIENT/GUEST RELATIONS
L5-621, 444-2880
PATIENT RIGHTS AND ORGANIZATIONAL ETHICS

Inpatient

The document is intended to provide helpful hints and useful information about services available at Stony Brook University Hospital which help support the Patient's Rights and Organizational Ethics Standards, as stated by JCAHO.

Complaint Mechanism

A complaint is defined as an expression of dissatisfaction or concern from a patient, family member or visitor regarding any aspect of care, service, facilities or staff. • Complaints can be categorized as routine or substantive.

Routine complaints should be resolved at the local level, with a prompt response, supportive interaction with the complainant and response regarding the resolution. When the complaint cannot be resolved in this way, the complainant can be referred to the appropriate supervisory level and ultimately to Patient/Guest Relations if it is evident that staff at the department/unit level cannot satisfy the complainant.

Substantive complaints occur when there is a crisis requiring immediate response, yet the resolution requires interdepartmental interaction and time needed to arrive at the proper response.

When the complainant is not willing or is too emotional to allow for this process, this person should be referred to Patient/Guest Relations for assessment, coordination and processing by the designated staff.

The A.D.N. and A.O.D. may become involved due to the nature of the issue or the time it occurred, e.g. nighttime and weekends.

When confronted with a problem, try to handle it at the local level. If resolving the complaint is not in your purview, call a Patient Representative.

Please keep in mind that complaints give us the opportunity to gather, trend and use the information in a positive way toward improvement efforts.

When to Call a Patient Representative

- When interpretation of a patient's right is needed or when you feel a patient's right is not being respected.
- When an Advance Directive needs clarification, or when the patient requests additional information about the Health Care Proxy.
- When a patient/family/visitor has expressed a complaint, question, problem or compliment.
- When a patient or family would benefit from a little extra attention.
- When there is a need to interpret hospital policies for a patient, family or visitor.
- When interpreters are needed for patients who are deaf or do not communicate in English and a translator would facilitate communication. Interpreters for the deaf are available ‘by calling Patient/Guest Relations.

Patient representatives are available Monday-Friday 8:30AM to 5PM. The main office for Patient/Guest Relations is located off the main lobby on level 5, room 621. The phone number is 444-2880. The staff can also be paged through the operator if the situation requires immediate attention. After hours and on weekends, the A.D.N. is available to assist with patient concerns that cannot be resolved on the unit.

For Patients with Limited English Proficiency
University Hospital has contracted an over-the-telephone interpreter service with the New World Language Line, a 24-hour interpreter assistance program that can be accessed from any hospital telephone by dialing 800-799-9916 and providing the following information:

Your name
Hospital name - University Medical Center Stony Brook
Client ID #720:100

You will be connected with an interpreter who can communicate with the patient. Brief the interpreter by summarizing what you wish to accomplish and give any special instructions. Then have the interpreter speak with the patient.

A volunteer list of foreign language translators is maintained on the HELP screen of the Hospital patient care computer system. You are asked not to overhead page for a ..., speaking person”, but to follow the guidelines mentioned above.

Units have dual handset phones that should be in the patient's room for those who need language assistance. All three speed dials on the phone automatically connect to the New World Language line. This will allow both you and the patient to use only one phone line while still allowing each of you your own hand set.

For Patients Who Are Hearing Impaired

Sign Language Interpreters are available for the hearing impaired. It is the patient’s right to have an interpreter. Certified interpreters can be arranged for patients by calling Patient/Guest Relations, ext. 4-2880. After hours and on weekends, an interpreter can be contacted directly calling the A.D.N. on duty, but this must be confirmed with Patient/Guest Relations (ext. 4-2880) for billing purposes, on the next business day.

Deaf Talk, an audio video Sign Language Interpreting Service is available in the Emergency Dept, 24/7. The monitor connects to an interpreting service within minutes of the request for interpretation. Contact the triage nurse for assistance.

Amplified Handsets for patient telephones are available through the hospital switchboard on level 1. The handset must be returned to the switchboard when the patient is discharged. In addition, the newer patient phones are equipped with volume control handsets.

TTY Machines are available for deaf patients through the switchboard on level 1. This machine can be brought to the patient's room for use during their inpatient stay. There is also another TTY machine in the emergency room.

The Relay service is available for anyone who wants to call someone who is deaf or hard of hearing and uses this to communicate. By calling 1-800-421-1220, you will be connected to a relay operator who will type the words you are speaking. These words will be transferred to the patient's TTY machine in their home. They, in turn, type a response and the relay operator will tell you what the person is typing. It is an easy and effective way to communicate.

Closed Captioning for the TV is available by calling the TV Rental service at ext. 4-1465 and requesting this service for a patient. A separate TV will be brought to the patient's room.

A device called the Pocket Talker is used to communicate with patients who are hard of hearing, especially if they usually wear a hearing aid and do not have it with them in the hospital. This simple device, which amplifies sound, consists of a headset worn by the patient and an amplifier, which the staff member talks into.

The Pocket Talker is stored in the Patient/Guest Relations office. Please call ext. 4-2880 if you wish to borrow it. A staff member will have to pick it up and sign it out. The unit or staff member is also responsible for returning it to Patient/Guest Relations.

For Patients Who Are Sight Impaired

Introduce yourself when you go into the room, tell the patient who you are and why you are there. Orient the patient to the room, especially the call bell, the phone and the bathroom.

If you are giving any medications, changing an IV or bandage or checking vitals, tell the patient when and where
you are going to touch him/her and why. Explain what medications you are giving him/her.
At mealtime, orient the patient to the tray by explaining where the food or beverage is located. Use the face of a clock to explain -- for example, your coffee is at 2:00. When walking with the patient, allow him/her to hold your arm and inform him/her when you are about to turn or stop and of any obstacles. When having the patient sit, place his/her hand on the back of the chair and let him/her seat himself, if appropriate.
If a canine companion dog assists the patient, it should remain with the patient.

**Ethics**

The Ethics committee is available to offer supportive counsel to help clarify and resolve ethical problems that might arise. An ethics consultation is a mechanism for discussing and clarifying ethical concerns in a given case and for providing supportive counsel to the patient, the family and caregivers. When an ethics consultation is requested, the ethics consultant on call will review the issue, the patient’s medical record, visit the patient and discuss the issue with the treatment team. Such issues may include:

- When it is unclear who should make decisions on behalf of the patient when the patient is too ill to do so, in the absence of an advance directive.
- When there is a question regarding the continuation of life sustaining treatment.
- When the patient or his/her family disagrees with the doctor’s planned course of treatment and discussion has not resolved the conflict.
- When the prior wishes of the patient, such as an advance directive, are not clear and need clarification.

An ethics consultant is available 24 hours a day, seven days a week to speak with patients, their family/significant other and hospital staff and can be reached by calling the operator and asking that the ethics consultant on call be paged.

**Advance Directives**

Inpatients are asked if they have an advance directive during the initial nursing assessment and the history and physical. Advance directives are important tools for the plan of care to assure understanding of the patient’s wishes regarding treatment should the patient ever be unable to speak for himself/herself.

The Health Care Proxy is an advance directive. It is used to designate a spokesperson if the person who fills it out is unable to make decisions due to illness. This spokesperson, or proxy, then steps in to discuss care with the physician and make decisions for the patient. The proxy should be informed of the patient’s wishes so that they are speaking with knowledge of what medical care the patient would or would not want. They should have knowledge of the patient’s wishes including life-sustaining treatment such as mechanical respiration and artificial feeding.

A Health Care Proxy form is enclosed in the booklet inpatients receive on admission. This form can also be obtained through Patient/Guest Relations. Patient Representatives, Social Workers and Chaplains are available to answer questions about the proxy and help patients fill out the form when a patient designates at admitting or during the hospital stay that they would like additional information on Advance directives. Please make referrals as appropriate.

Once the form is properly filled out, signed and witnessed, a copy should be placed in the medical record and the original returned to the patient. Any discussion about the proxy should be documented on the Interdisciplinary Patient Education form in the patient’s medical record.

If the patient has specified that he/she filled out a Health Care Proxy form and does not have it with him/her, cannot produce it or is too ill to ask, you can try to locate the proxy by either contacting the patient’s next of kin or proxy if he/she specified the person’s name and phone number on admission or you can check any previous hospital medical records which may contain the proxy form. To locate a medical record, call the Medical Records Department at ext.4-1300 or ext. 4-4780. The staff is available from 7:30AM to 12Midnight to pull old charts. If they locate the proxy form, they can fax it to your unit to place in the patient’s chart.

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