

OREGON STATE HOSPITAL

PORTLAND – SALEM

POLICIES AND PROCEDURES

SECTION 7: Patient Rights

POLICY: 7.005

SUBJECT: Patient Rights

POINT DEBORAH HOWARD

PERSON: DIRECTOR CONSUMER AND FAMILY RESOURCES

APPROVED: GREGORY P. ROBERTS
SUPERINTENDENT

DATE: JANUARY 4, 2012

I. POLICY

- A. The Basic Patient Rights Provided by Statute, described in this document, may be asserted and exercised by the patient or the patient's legal guardian.

All persons receiving treatment at Oregon State Hospital shall have the right to:

1. Care provided in a setting which is least restrictive to liberty, least intrusive, and provides the greatest degree of independence possible, consistent with the patient's treatment, safety, and security needs;
2. A humane living environment that affords reasonable protection from harm and affords reasonable privacy;
3. Communicate confidentially, freely, in person, and by sending and receiving sealed mail (except as limited for security reasons by ORS 426.010), and by reasonable access to telephone with privacy for receiving and sending calls. The patient must be immediately informed, verbally and in writing, of any limitation to their right to send/receive sealed mail;
4. Wear his/her own clothing;
5. Keep his/her personal possessions, including toilet articles;
6. Religious freedom;
7. A private storage area with free access thereto;

8. A written, individualized treatment plan, with services based upon that plan, kept current with his/her progress, with reassessment of service needs and to participate in the development and reviews of his/her treatment plan at a level appropriate to his/her capabilities;
9. Be provided with a reasonable explanation of all service considerations;
10. Not be required to perform routine labor tasks of the facility except personal housekeeping duties, without reasonable and lawful compensation;
11. Be provided with opportunity for daily access to fresh air and the outdoors. This right may be limited when it would create significant harm to the person or others. The patient must be immediately informed, verbally and in writing, of any limitation to this right.
12. Be free from potentially unusual or hazardous treatment procedures, including electroshock therapy, unless they have given their express and informed consent. This right may be denied to such persons for good cause only as defined by administrative rule by the Superintendent or his/her designee, but only after consultation with and approval of an independent examining physician. Any denial shall be entered into the patient's treatment record and shall include the reason for the denial: No patient shall be subjected to psychosurgery, as defined in ORS 677.190 (22)(b);
13. Not have mechanical restraints applied unless it is determined by the Chief Medical Officer of the hospital or his/her designee to be required due to the medical needs of the person. Every use of a mechanical restraint and the reasons therefore shall be made a part of the clinical record of the person over the signature of the Chief Medical Officer of the facility or designee.
14. Not participate in experimentation or research without informed voluntary written consent;
15. Receive medication only for his/her own clinical needs;
16. Not be involuntarily terminated or transferred from services without prior notice, notification of available sources of necessary continued services, and exercise of a grievance procedure;
17. Assert grievances regarding the infringement of rights described in this document and to have those grievances considered in a fair, timely, and impartial grievance procedure;

18. Exercise the rights specified in this document without any form of reprisal or punishment;
 19. Once verification of attorney identity has been completed, i.e., picture ID and State of Oregon Bar Card, patients will have reasonable access to counsel whenever his/her substantial rights may be affected;
 20. Petition for a writ of habeas corpus;
 21. Such other rights as may be specified by regulation;
 22. Exercise all civil rights in the same manner and with the same effect as one not admitted to the facility, including, but not limited to the right to dispose of property, execute instruments, make purchases, enter contractual relationships and vote, unless he/she has been adjudicated incompetent and has not been restored to legal capacity. Disposal of personal property in possession of the person in a state institution described in ORS 426.010 is subject to limitation for security reasons. The patient must be informed, verbally and in writing, of any limitation to their right to dispose of personal property;
 23. Develop advanced directives for their care in the case of future serious medical or psychiatric illness.
 24. Request documents in Alternate Formats such as large print, Braille, verbal presentation, sign and language interpretation or accommodation related to services.
 25. Be furnished with a reasonable supply of writing materials and stamps;
 26. Not receive services without informed consent except in a medical emergency or as otherwise permitted by law;
 27. Be free from abuse or neglect and to report any incident of abuse without being subject to retaliation;
 28. Visit with family members, friends, advocates and legal and medical professionals.
- B. Administrative Rules on Patient Rights: There are eight administrative rules that describe policy and procedure on patient rights.

- Of the right to send or receive sealed mail under subsection (A)(3) of this section; or
 - Regarding the disposal of personal property under subsection (A)(21) of this section.
1. Any limitation under this subsection and the reasons for the limitation must be stated in the person's written treatment plan.
 2. The person has the right to challenge any limitation under this subsection pursuant to rules adopted by the department. The person must be informed, verbally and in writing, of this right.
- C. Additional Rights in Residential Treatment Facilities. Residents shall also have a right to:
1. Adequate food, shelter, clothing, consistent with OAR-309-034-0159;
 2. A reasonable accommodation if, due to their disability, the housing and services are not sufficiently accessible;
 3. Access to community resources including recreation, religious services, agency services, employment and day programs, unless such access is legally restricted;
 4. Be free from seclusion or restraint, except as outlined in OAR 309-035-0169;
 5. To review the Residential Treatment Facility's policies and procedures.
- D. Administrative Rules on Patient Rights: There are eight administrative rules that describe policy and procedure on patient rights.

Handling of Mail	OAR 309-102-000
Telephone Use	OAR 309-104-000
Having Visitors	OAR 309-106-000
Handling Personal Property	OAR 309-108-000
Patient Abuse	OAR 309-116-000
Use of Restraints	OAR 309-112-000
Informed Consent to Treatment	OAR 309-114-000
Grievance Procedures	OAR 309-118-000

These rules are filed in the Superintendent's office and the Program Directors' offices.

E. Patients are informed of their rights in the following ways:

1. Staff read and discuss patient rights with each patient as part of the admission process. This is documented on form OSH STK 03653 MR, and filed in the patient's medical record.
2. Each patient (and guardian) receives an informational brochure at admission that includes a description of patient rights.
3. Both the statutes on patient rights and a summary of the Administrative Rules are posted in every unit where they are freely available to all patients. If patients or their families request, a complete copy of the Administrative Rules on Patient Rights is available.

F. Patient rights are assured by having:

1. All staff responsible for knowing the rights of patients and assuring that these rights are protected.
2. Designated staff on each unit who are responsible for assisting patients or their families/representatives in utilizing the patient grievance process.
3. The hospital's Patient Grievance Committee monitors the patient grievance process. The hospital's Patient Rights Committee will monitor patient rights.
4. Patient ability to appeal directly to the Oregon State Hospital Superintendent regarding patient abuse issues.
5. Patients have phone and mail access to the Office of Investigations and Training, Disability Rights Oregon, and public defenders or attorneys of his/her own selection who are independent of the hospital structure.

II. REFERENCES

Oregon Revised Statutes 127.700 through 127.737
Oregon Revised Statutes 426.380 through 426.395
Oregon Revised Statutes 426.010
MHDDSD Administrative Rules 309-100-000 through 309-118-050
The Joint Commission Standards; AMH Manual, "Rights and Responsibilities of Patients"

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DATE: January 4, 2012

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Oregon Laws 1993, Chapter 96
OSH Policy and Procedure 7.001, Handling of Mail for Patients

Replaces OSH Policy and Procedure 7.005, *Patient Rights*, dated 03/16/2010.