



Current Status: *Active*

PolicyStat ID: 9875573



Implementation: 07/2020
 Effective: 06/2021
 Last Reviewed: 06/2021
 Last Revised: 06/2021
 Next Review: 06/2024
 Owner: *Mary Waldo: Reg-Nsg Practice/Qual Dir*
 Policy Area: *General Operating Policy*
 Standards & Regulations:
 References:
 Applicability: *OR - Oregon Region*

Right to Support Persons for Patients with Disabilities

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GENERAL OPERATING POLICY

Effective: July 30, 2020

PSVMC, PPMC, PMMC, PMH, PWFMC, PNMC, PHRMH, PSH

OBJECTIVES

- Provide guidelines for the role of support persons and support care conferences within Providence Health & Services, Oregon Region (PHS-OR) hospitals and emergency departments;
- Promote the safety of patients, support persons and caregivers by defining the conditions under which a support person will function

POLICY STATEMENTS

- Patients admitted to a hospital or in an emergency department may designate at least three support persons. Refer to *definitions* section for definition of a "patient."
- Either the patient or a patient's legal representative in collaboration with the patient, may designate support persons.
- The hospital must allow at least one support person to be physically present with the patient at all times in the emergency department and during the patient's stay in the hospital. This includes, but is not limited to, an operating room, a procedure room, or other area where generally only patients and hospital staff are allowed.
- The hospital may not condition the provision of treatment to a patient in accordance with Oregon Laws 2020, chapter 20, section 1 (Special Session).
- The hospital and/or emergency department may impose conditions for any support person(s) present to ensure the safety of the patient, support person(s) and staff.
 - Refer to section below: **Conditions to Protect Safety**
- To ensure the safety of the patient, support persons and caregivers, support persons may not perform tasks otherwise done by a hospital employee and must comply with the conditions outlined below.
- Support persons may not provide interpreter or translation services (Refer to Interpreter Policies).

- At the earliest feasible time, the hospital will provide all patients orally and in writing notice of their right to support persons. Notice to patients must include that treatment cannot be conditioned upon having an advance directive, POLST, or an order withdrawing or withholding life support such as a Do Not Resuscitate order. Notice must be made available in alternate formats at the request of the patient or the patient's legal representative.
- To ensure the privacy and safety of all patients, support persons and caregivers in locked units with psychiatric populations, a clinical care conference will be held to determine the parameters of accommodation provided by the support person(s) for the patient.
- In cases where the physical presence of a support person(s) must be denied to protect the safety of the patient, support person(s), and staff, the patient must be **immediately** notified verbally and in writing of the opportunity to request a support care conference
 - Refer to sections below: Denial of Support Person, Support Care Conference and Documentation of Support Care Conference
 - Refer to Addendum A: Denial of Access for additional requirements and Addendum B: Support Persons Denial Letter.
- This policy is posted on Providence's website and a summary of this policy is posted at entry points of each hospital that are clearly visible to the public, with instructions on how to obtain the full policy. The policy may be requested in an alternate format by contacting The Customer Care Team at 503-962-1275 or 1-855-360-3463.

DEFINITIONS

- **Patient:** A patient admitted to a hospital or seeking medical evaluation and care in an emergency department who needs assistance to effectively communicate with hospital staff, make health care decisions, understand health care decisions, or engage in activities of daily living **due to a disability**, which may include:
 - A physical, intellectual, behavioral or cognitive impairment, e.g.,
 - Has a cognitive or mental health disability that affects the patient's ability to make medical decisions or understand medical advice; and
 - Needs assistance with activities of daily living and the hospital staff are unable to provide or less effective at providing the assistance.
 - Deaf, deafblind, hard of hearing or has another type of communication barrier and may require the assistance of a support person to ensure effective communication (that does not include interpretation or translation) with hospital staff.
 - Blind;
 - Autism;
 - Dementia.
 - Has behavioral health needs that the support person can address more effectively than hospital staff.
- **Support Care Conference:** A meeting that must include discussion of the hospital's denial of a patient's request for a support person's physical presence with the patient (or a portion of such a request), and any parameters for permitting a support person to be physically present with the patient. The support care conference can be held in person, by telephone, or electronic media, and includes the following participants:
 - The patient
 - A representative from the patient's hospital care team
 - The patient's legal representative (if applicable)
 - The patient's designated support person(s)
- **Support Person:** A family member/significant other, guardian, personal care assistant or other paid or

unpaid attendant selected by the patient to physically or emotionally assist the patient or ensure effective communication with the patient.

- **Visitor:** Refer to GOP "Visitors to Patients".

CONDITIONS TO PROTECT SAFETY

- Support persons may not perform tasks otherwise done by a hospital employee and must comply with the following conditions:
 - When requested by hospital employees, support persons must wear personal protective equipment provided by the hospital and follow hand washing and other protocols for preventing the potential spread of infection;
 - Be free of any symptoms of viruses or contagious diseases;
 - Submit to screenings for viruses or contagious diseases upon entering and exiting the hospital;
 - Submit to testing for contagious disease per unit policy;
 - May not dispense medications of any kind without consultation with the patients' clinical care team;
 - May not make changes to medical devices or technology that supports patients care, including but not limited to oxygen;
 - May not provide interpreter or translation services (Refer to Interpreter Policies).
- If necessary to facilitate the patient's care, support person(s) may be present with the patient at all times in the emergency department and during the patient's stay at the hospital. PHS-OR retains the right to restrict the presence of support persons to what is feasible and needed to maintain the safety of the patient, Support Person(s), and caregivers.
- Nothing in this section prevents a patient and his or her treating team from reviewing available medical options in the privacy of the therapeutic relationship. This includes situations where a patient with decision-making capacity informs his or her treating provider that less aggressive medical care is desired.
- Unless a patient requests otherwise, the emergency department and hospital must ensure that a support person designated by a patient, or a patient's legal representative, is physically present for any discussion in which the patient is asked to elect hospice care, sign an advance directive, or sign any or other document allowing the withholding or withdrawing of life-sustaining procedures or artificially administered nutrition or hydration. If there are questions about who the appropriate decision maker is, please refer to PHS-OR "Consent and Refusal to Consent Policy" and "Privacy and Security Policy".

DENIAL OF SUPPORT PERSON

Refer to Addendum A: Denial of Access for additional details.

- The hospital and/or emergency department may impose conditions for the physical presence of any support person(s) to ensure the safety of the patient, support person(s) and staff.
 - In addition, in hospital units and emergency departments where patient care is rendered in a congregate setting (eg. behavioral health), the safety of other patients, as well as the confidentiality for those being served, will be considered.
- If the hospital denies a patient's request for a support person's physical presence, or a portion of such a request, for any duration, to protect the patient, support person(s), and staff, the following must occur:
 1. Notify the House Supervisor immediately.
 2. The House Supervisor will immediately notify the patient and the patient's designated support person(s) orally and in writing of the opportunity to request a support care conference to discuss the denial and any parameters for permitting a support person to be physically present.
 - a. For written notification of denial, provide copy of Addendum B: Support Persons Denial Letter

3. Documentation

- a. Document in the treatment plan the oral and written notification to the patient and support person(s), and the patient and support person(s) response, whether it be a request or declination for a support care conference.

SUPPORT CARE CONFERENCE

- Upon request for a support care conference, conduct a support care conference as soon as possible but no later than 24 hours after admission or prior to a procedure or operation.
- Participants must include the patient, a representative from the patient's hospital care team, the patient's legal representative (if applicable), and the patient's designated support person(s).
- Support care conferences can be held in person, by phone, or electronic media (for example, Zoom, Teams).
- Content must include:
 - Discussion of denial; and
 - Any parameters for permitting a support person to be physically present with the patient, which may include any limitation, restrictions, or additional precautions that may be implemented for the safety of the patient, support person, and hospital staff.

DOCUMENTATION OF SUPPORT CARE CONFERENCE

- Following a support care conference, the hospital shall document the decision and any reasons for the limitation, restriction, additional precautions or prohibition in the treatment plan.
- If a support care conference does not occur, the hospital shall document in the treatment plan why the support care conference did not occur.

AUTHORITY

Providence Health & Services – Oregon Region, pursuant to the requirements of OAR 333-501-0055, OAR 333-505-0030, OAR 333-505-0033, and OAR 333-505-0050

LIST CROSS-REFERENCE

GOP: Consent and Refusal of Consent for Procedures (PolicyStat ID: 7900161)

GOP: Interpreter for Deaf HOH Deaf-Blind Patients (PolicyStat ID: 6074815)

GOP: Interpreter for Patients – Spoken Language Interpreter Services (PolicyStat ID: 6074766)

GOP: Rights and Responsibilities of Patients (PolicyStat ID: 6293962)

GOP: Visitors to Patients (PolicyStat ID: 5114862)

PSJH-RIS-850 General Privacy Policy (PolicyStat ID: 7919893)

All revision dates:

06/2021, 07/2020

Attachments

Addendum A: Access of Denial Process

Addendum B: Support Persons Denial Letter

Approval Signatures

Approver	Date
Sheri Kulink: Chief Exec Prov Milwaukie Hosp	06/2021

Applicability

OR - Clinical Support Staff (CSS), OR - Connections, OR - Credena Health (CH), OR - Home Health (HH), OR - Home Medical Equipment (HME), OR - Home Services, OR - Home Services Pharmacy (HSRx), OR - Hospice (HO), OR - Providence Ctr for Medically Fragile Children, OR - Providence Hood River Memorial Hospital, OR - Providence Medford MC, OR - Providence Medical Group, OR - Providence Milwaukie Hospital, OR - Providence Newberg MC, OR - Providence Portland MC, OR - Providence Seaside Hospital, OR - Providence St. Vincent MC, OR - Providence Willamette Falls MC

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