

Perspectives of being a patient: Expectations, rights and responsibilities?

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ABSTRACT

From a healthy person when a person becomes a patient may be a matter of short duration or long duration depending upon the type of illness. A patient when reaches to the health provider have many expectations some of which is easy to fulfil others may be difficult to be met with. Care providers must know these expectations so that they know them, understand them and try to fulfil the possible expectations. Some of these may be enshrined in the rights of the patients and these rights of the patients have to be taken care of and it will be possible only when all medical and health professionals know well about it and in detail. Along with the expectations and rights of the patient there are responsibilities of the patient too which patients must fulfil to have a better experience and comforts in the different settings of the health professionals.

Keywords: Duties of the patient, Expectations of the patients, Rights of the patient.

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INTRODUCTION

What is a Patient?

A patient is a person under medical treatment or medical care or waiting for medical treatment or medical care¹ or a person who is receiving medical and dental care by a particular doctor when required.² A patient can be a child, adult or old man; male-female or third gender; normal or differently abled person and the expectations differ in the different categories.

Expectation of Patients

Many physicians may not know the expectations of the patients and it is very important that they should know these prospects. There are huge expectations from the physicians and other caregivers.

Patients expect a warm welcome with friendly staff as is done in the hotel industry or airline.³ The biggest expectation may be that he is properly listened to so that perspective of the patient can be understood by the treating physicians. The patient expects clear instructions from the treating physician. The patient expects empathy. The care and concern of the caregiver are very important to the patient. The patient expects that he should be able to communicate with the physician at any time during the day or night. Treatment should be initiated as soon as possible.⁴

In one of the studies the biggest expectation was that history taking should be very good (100%), Referral should be done promptly when required (98%) and listening by the doctor without interruption (87.7%) were followed. In a good number of people, priority was attentiveness (78.02%). The expectation of information regarding illness (75.79%), clear instruction about prescription (75.15%) and privacy concerns (75.0%) were almost at par followed by the partnership in decision making (72.92%), good treatment (70%) and

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dietary advice (67%). Greeting from the doctors (51.91%) and confidentiality (46.49%) was also desired.⁵ These expectations may vary depending upon the culture and regions. In one study in China, it was indicated that patients want a refund of the consultation fee if no medication was prescribed and only tests were written.⁶

Why Meet Patients' Expectation

Meeting patients' expectation may be challenging. But when the expectations are fulfilled that will result in a better outcome of the results in a treatment process. It will also reduce the suing by the patients as patients will be more satisfied.⁴

Precautions to be Taken by the Physician while Meeting the Expectations of the Patients

A physician should know that how to fulfil the expectation of the patients. There should a way to measure the expectations so that necessary precautions can be taken. These expectations can be measured in three domains viz health outcomes, individual clinicians and health care system.⁷

Physicians should see they do not get manipulated by the emotions of the patients and their relatives. While ordering tests, it must be explained to the patient why these tests are

needed. The patient must be informed about choosing a particular line of treatment and if there are options, the wish of the patients and the choice of the patient must be respected. If a patient wishes to consult another physician that must be respected and allowed or if a physician thinks another consultation is required with another specialist that must be taken.⁴

In the emergency, 5Cs are very important to be taken care of, which are core question of the patient, how to communicate and contact, collaborate and close the loop and should be taken into consideration while dealing with the patients.⁸

Waiting time in the OPD and the availability of the doctor on the phone are two main issues for the patients as far as expectation of the patients is concerned in one study and should be taken care of.⁹

With full honesty, the physician should balance the over-expectations of the patients with reality and should provide them with enough information so that they understand and also must listen to them completely before deciding anything and giving them all the options explaining the benefits and drawback of each option and should not hurry in listening to the final answer but should give them sufficient time and resources to reach the right conclusions.¹⁰

Rights of Patients

The rights of the patients are the basic rules governing the interaction of the patient with the medical caregivers and medical institutions. Usually, caregivers do not realize the rights of the patients.¹¹ Every patient has some rights. They were vague in India but now the Human rights Commission of India has provided the list of rights and these rights of the patients need to be displayed in every health care institute.¹²

These rights are right to Information; right to records and reports; right to emergency medical care; right to informed consent; right to confidentiality, dignity and privacy; right to a second opinion; right to transparency in rates and care as per prescribed rates; right to non-discrimination; right to safety and quality care according to the standards; right to choose alternative treatment options if available; right to choose the source for obtaining medicines or tests; right to proper referral and transfer, which is free from perverse commercial influences; right to protection for patients involved in clinical trials; right to protection of participants involved in biomedical and health research; right to take discharge of the patient, or receive the body of deceased from the hospital; right to patient education and right to be heard and seek redress of complaints.¹²

In an emergency, a patient cannot be refused treatment even if he cannot pay. The patient cannot be abandoned once the patient is accepted.¹¹ Patients have the right to participate in the health care decisions.³

Patients have many other rights e.g. not to be awakened from sleep unless it is medically necessary to give treatment, right to treatment to avoid unnecessary discomfort, right to information about his rights as a patient, right to be free from

all abuses and harassment, right of religious and spiritual services, right to appropriate pain management, right of not to be exploited financially and the right to be treated with respectful care by competent persons.¹³

In the USA patients have the rights as enshrined in the Health Insurance Portability and Accountability Act [HIPAA]. They have the right to informed consent as well as the right to opt for a treatment or refuse treatment and treated with respect, they enjoy the right to make a decision about end of life care, the right to obtain medical records and maintain the privacy of the records.¹⁴

A patient has the right to choose a health professional and refuse procedures that are against his religious beliefs.¹⁵ A patient has the right to explanation if he is to be transferred to another institution and know the identity of the treating professional. A patient has the right to leave the hospital but it should not prejudice the safety and health of other people and fully knowing the consequences of leaving the hospital. A patient has the right to tell his grievances without the fear of reprisal and the opportunity to settle these grievances amicably.¹⁶

Responsibilities of the Patient

If the patient has the rights simultaneously he has the responsibilities too to keep the appointments and be punctual to attend the appointments, respect the other health workers and caregivers, and respect the rules of the facility being used by him. A patient has also to help in limiting the visitors. A patient needs to provide correct history, help in investigations and follow the advised treatment. The patient should report if does not understand treatment or instructions and should take suggested precautions and report any changes in health condition and allergies, be responsible if not taking the suggested treatment and be responsible for payment of the bills. They need to respect the rights of others and property.¹³ They need help to measure pain and develop a pain management plan with their health professional. They need to be considerate of other patients too.¹⁶

Violation of Rights of Patient

If patients rights are violated this may fall under professional misconduct and professional negligence. For professional negligence a patient can sue the doctor in the civil or criminal court but has to prove that a medical professional had a pre-existing duty to treat and he had breached that duty due to which damage had been caused to the patient and breach of the duty had caused this damage to the patient.¹¹

Due to non-fulfilment of the expectations & violations of rights, there are complaints from the patients

Common complaints by the patients against the hospital are lack of orientation of room in the hospital, and deficiency of professionalism in the hospital staff, messy rooms, loss of personal belongings, noisy nursing stations and lack of sleep, communication deficit, not updating list of health providers in every shift, and health professionals entering the room without



knocking and patients not being listened to in their care.¹⁷ The nature of the complaints may vary from place to place and institution to institution.

In one of the studies, common grievances against the physician were of five types. In 38.8% there was a failure to fulfil expectations of the patients in the treatment and examination, promptly diagnose a failure in 20%, in 17% there was allegation of rudeness; practising beyond the area of concern and causing pain in 13% and inappropriate billing in 10%.¹⁸

Redressal of Patients' Complaints

"Grievance would only mean a grievance relating to any patient / client out of the implementation of the policies/rules or decisions of the Hospital".¹⁹ There should be a grievance redressal policy of every medical and health institute. Every institute may have a different redressal mechanism. Usually, there is a Grievance Redressal Committee to take care of complaints and grievances.

Usually, after registering the complaint a preliminary enquiry is held and findings are shared with the concerned person for the resolution of the complaint. If still, the grievances persist a secondary investigation may be held for non-resolution of the complaint and discussed with the complainant for further resolution and the committee also suggests assessment, action to be taken or being reported to the higher authorities and further preventive measures.¹⁹

Complaints help in improving the safety of the patients. There should be a mechanism that should be rigorous to analyse and interpret the complaints. Monitoring of the complaints will definitely increase the safety of the patients.²⁰

The satisfaction rate of the patient is higher in the smaller places but patients of older age are more demanding.⁹ In another study, it was observed that younger women filed most complaints and these complaints were against the new recruits. Though it was seen that in 45% of cases there was no breach of standards of practice yet these complaints were resolved in 17% of the cases just by completing insurance forms, adjusting the bills and apologising.¹⁸

DISCUSSION

General niceties of the society apply to the medical profession and patient must be made comfortable as far as possible when the patient arrives in the medical setup. Greeting, smiling, made to sit comfortably, listened properly for complaints remembering no problem is too trivial for the patient for which patient is complaining, examined gently, explained about the disease in the language of the patient in which patient is comfortable, explained why the tests if required are necessary, instructed properly about the medication and diet. It is also important to explain what to do and what not to do. This will create a very good rapport and will help in better outcomes for the patients.

Doctors will too be benefitted by better compliance by the patients resulting in a better outcome for the patients.

In a health institute, there should be letterboxes where a patient can put the complaints. Phone numbers and email addresses should be prominently displayed where complaints can be sent. A nodal person should be there in a health setting to redress the grievances. The name of such a person should also be prominently displayed. Redressing the complaint should be time-bound.

Information and analysis of complaints of the patient can definitely improve the delivery of the health system in a better manner. It has been observed that assessment of the persons involved is not given due importance due to which improvements seems difficult.²¹

CONCLUSION

It must be remembered by the physicians and caregivers that as the cost may not be the primary consideration when patient choose the treating doctor other requirements e.g. transparency about success rate, giving them dignity and compassion, play an important role and these values must be adhered to.³ Therefore, all health professional should know the expectations and rights of the patient and take care of the rights of the patients to make the patient more satisfied for better health outcomes. The experience of the patient in a medical facility will become better if patients will fulfil their responsibilities too.

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