



1. Purpose

This Procedure outlines the process by which the West Coast District Health Board (WCDHB) will endeavour to comply with the requirements of the Code of Health and Disability Services Consumer Rights (Code).

2. Application

This Procedure is to be followed by all staff members employed by the WCDHB.

3. Definitions

There are no definitions associated with this Procedure.

4. Responsibilities

For the purposes of this Procedure:

the ***Chief Executive Officer*** is required to:

- oversee all aspects of this Procedure;

Staff Members are required to:

- ensure they abide by the requirements of this Procedure.

5. Resources Required

This Procedure requires:

- i) Code of Health and Disability Consumer Services Rights Brochures
- ii) WCDHB Rights and Responsibilities Sign

6. Process

- 1.00 The Code sets out the legal rights for patients/consumers who receive a health and/or disability service from the WCDHB.
- 1.01 All new staff members will as part of their orientation programme attend a mandatory education presentation that outlines the requirements of and compliance with the Code. (see *WCDHB Orientation Procedure*).
- 1.02 All staff members are required to biennially attend a mandatory education presentation that outlines the requirements of and compliance with the Code (see *WCDHB Staff Education, Training and Development Procedure*).
- 1.03 As part of the WCDHB quality auditing programme, compliance with the Code will be audited.
- 1.04 All clinical staff employed by the WCDHB are required to maintain registration with their relevant registration body.



- 1.05 Patient/consumers will be surveyed as to whether they felt staff treated them with respect, and results used as a service improvement tool. (see *WCDHB Patient Satisfaction Survey Procedure*).
- 1.06 All staff members are required to maintain patient/client confidentiality in accordance with the requirements of the Health Information Privacy Code. All staff members are required to undergo regular mandatory education relating to the management of personal health information.
- 1.07 Where required and appropriate, staff members are required to provide services that take into account the needs, values and beliefs of different ethnic and cultural groups. This may include:
- acknowledging the need of individuals to practice their cultural values and beliefs;
 - consultation of Tangata Whenua to ensure the needs of Maori are met during service provision
 - identification and elimination of barriers to individuals of different ethnic and cultural groups.
- 1.08 All staff members are required to ensure that they do not discriminate, coerce, harass or exploit patients/clients. Staff members are not to refuse to treat individual on the grounds of age, marital status, sexual orientation, mental illness, or that they have/may have a contagious or social stigmatised disease.
- 1.09 Where a staff member feels that an individual has been subjected to some form of discrimination, coercion, harassment or exploitation, staff are encouraged to act as advocates for that individual, providing information on how the breach of their rights can be redressed or contacting an appropriate agency in order to inform them of the actions.
- 1.10 Staff members will at all times act in a manner that ensures that the rights to dignity and independence of a patient/consumer are abided with in a manner that optimises their quality of life by taking a holistic view of the individual's need in order to achieve the best possible outcome for them in the particular circumstances.
- 1.11 Staff members are required to maintain a level of professional knowledge and skill to enable them to practice safely and competently as part of their registration requirements.
- 1.12 Staff members are required to communicate with patients/consumers in a manner consistent with good professional practice. All communication is to be documented in the patient/consumer's clinical record as per the requirements of the WCDHB Clinical Documentation Procedure. Where access to an interpreter is required, this will occur as per the requirements of the WCDHB Interpreting For Patients Procedure.
- 1.13 Staff will provide patients with information as and when requested in accordance with the requirements of the WCDHB Disclosure of Personal Health Information Procedures.
- 1.14 Staff will only provide services to patients where informed consent has been obtained in accordance with the requirements of the WCDHB Informed Consent Procedure. Where a patient/consumer wishes to withdraw consent and/or refuse services, this will be managed according to the requirements of the WCDHB Refusal of Treatment/Discharge Against Professional Advice Procedure.



Any request for the return or disposal of a body part or bodily substances will be managed in accordance with the requirements of the WCDHB Return of Body Parts Procedure.

- 1.15 Staff members will ensure that where appropriate patients are allowed to have a support person present in accordance with the WCDHB Visitor and Support Person Procedure.
- 1.16 Staff will ensure that all teaching and research activities involving patients is undertaken in accordance with the requirements of the WCDHB Research Procedure.
- 1.17 All staff members are required to ensure that complaints are managed in accordance with the requirements of the WCDHB Complaints Procedure.
- 1.18 WCDHB will ensure that copies of the Code are displayed and made available:
 - i) in the Admissions/Reception area of each WCDHB Hospital;
 - ii) in each Ward of each WCDHB Hospital;
 - iii) in all Outpatient/Rural Clinics
 - iv) in the Reception Area, Corporate Office.
- 1.19 The Risk and Quality Manager is responsible for ensuring compliance with Section 1.18.

7. Precautions And Considerations

- ➔ All new staff members will participate in the mandatory education programme that outlines the requirements of and compliance with the Code.
- ➔ As part of the WCDHB quality auditing programme, compliance with the Code will be audited.
- ➔ WCDHB will ensure that copies of the Code are displayed and made available

8. References

Code Of Health and Disability Services Consumer Rights (1996)

9. Related Documents

WCDHB Clinical Documentation Procedure.
WCDHB Complaints Procedure
WCDHB Informed Consent Procedure
WCDHB Interpreting For Patients Procedure
WCDHB Patient Satisfaction Survey Procedure
WCDHB Refusal of Treatment/Discharge Against Professional Advice Procedure
WCDHB Research Procedure
WCDHB Return of Body Parts Procedure
WCDHB Visitor and Support Person Procedure
WCDHB Ethics Procedure
WCDHB Orientation Procedure
WCDHB Staff Education, Training and Development Procedure



**Compliance With The Code Of Health &
Disability Services Consumer Rights Procedure**

Procedure Number
WCDHB-PG-0037

Version Nos:
8

| | | |
|-----------------------------|-----------------------------|----------------------------------|
| Revision History | Version: | 8 |
| | Developed By: | Quality Improvement Co-Ordinator |
| | Authorised By: | Chief Executive Officer |
| | Date Authorised: | May 1995 |
| | Date Last Reviewed: | November 2007 |
| | Date Of Next Review: | November 2009 |