

#### City of Richmond

#### **Report to Council**

To:

From:

Richmond City Council

Mayor Malcolm D. Brodie

Chair, General Purposes Committee

Re:

PATIENT'S BILL OF RIGHTS

Date:

May 5<sup>th</sup>, 2004

File:

01-0150-20-HEAL1-

01/2004-Vol 01

The General Purposes Committee, at its meeting held on Monday, May 3<sup>rd</sup>, 2004, considered the attached material, and recommends as follows:

#### Committee Recommendation (Cllrs. Howard and Kumagai opposed)

- (1) That the "Patient Bill of Rights" (as developed by the BC Nurses Union and presented by Ms. Marnie Hewlett, RN), be supported and endorsed as a working document which sets out minimum goals for the health care system;
- (2) That the City's position be conveyed to the appropriate Federal and Provincial ministries; and
- (3) That Councillor Linda Barnes, as Council Liaison, take the matter to the Vancouver Coastal Health Authority.

Mayor Malcolm D. Brodie, Chair General Purpses Committee

Attach.

# BC Nurses' Union



### Patient's Bill of Rights

AS Registered Nurses and Registered Psychiatric Nurses, we are committed to giving the best possible health care service and advocating for British Columbians when we see their health care needs not being met.

We believe that residents of British Columbia have the right to an effective publicly funded and publicly administered health care system consistent with the Canada Health Act.

We believe residents of British Columbia have the right to timely access to care appropriate to their needs from appropriately qualified health care professionals. We also believe residents both in the hospital and the community setting, have the right to choose their own physician.

We recognize the health care system does not currently have the capacity to meet patient's needs in all cases, and that funding needs to be increased at both the Federal and Provincial level in order to provide better health care. We believe the provincial government should meet with providers and develop an implementation plan to improve the health care system over the next five years.

This document describes the improvements Registered Nurses and Registered Psychiatric Nurses believe are needed in the system, and some of the health care rights the provincial government should be ensuring British Columbians receive.

#### Access to Hospital Services

Residents of urban and rural communities have a right to access an emergency department within a maximum of half an hour's



travel, and 98% of residents in remote communities must be able to access emergency care within 1 hour's travel.

Patients who access an emergency department have a right to be immediately assessed (triaged) and, consistent with national standards, assessed/treated immediately if requiring resuscitation, within 15 minutes for emergent cases, and within 30 minutes for urgent cases. Patients requiring hospital admission must not be held in emergency departments for more than six hours, and must be discharged, transferred to another hospital, or admitted to a hospital bed within that time frame.

Patients have the right to agreed upon maximum wait times for diagnostic, therapeutic, surgical and rehabilitative treatment, based on whether their condition is life-threatening, urgent or non-urgent.

Residents of British Columbia have the right to an open and transparent public process to establish maximum wait times, which includes input from the public and health care providers.

Patients who cannot be provided with emergent hospital treatment in their community have a right to subsidized travel to and from their community, including when their surgery or treatment is cancelled.

Patients whose operations are cancelled on the day of their surgery have the right to be re-booked for their operations within one month of cancellation.

Patients who are being discharged from hospital have the right to have arrangements made to provide them with continuing nursing or rehabilitation care, including the provision of medications and equipment, prior to discharge, and their caregiver(s) have the right to be informed of these arrangements prior to discharge.

Palliative patients have the right to decide whether they want to die at home, in a hospice, or in a hospital palliative care bed.

Patients who require mental health care in a hospital or mental health institution have the right to access a psychiatric bed within six hours of referral.

Patients in hospitals and residents in long term care facilities, have the right to an environment which is clean and safe, and the right to a choice of meals suitable for their dietary needs with a choice of portion sizes.

#### **Access to Community Services**

Residents of rural and remote communities have a right to first care in their community by a physician, or where a



doctor is not available, a nurse who is authorized to initiate medical evacuation.

Parents have a right to subsidized pre-natal teaching. In addition, they have a right to pre-natal care and the right to post-natal nursing follow-up in their homes.

Children have a right to fully funded, comprehensive health screening and education programs in their schools. These programs should include immunizations, dental, scoliosis, eye and hearing screening as well as reproductive, nutrition, and preventative health education from a school nurse.

Addicted patients have a right to detox and addiction treatment in a treatment centre where they can receive physical and psychological support within 48 hours of them making a decision to detox.

Patients who require mental health care in the community have a right to a visit from a mental health nurse within 4 hours in the daytime if referred as an urgent patient, and within 2 days if non-urgent.

Patients with persistent, serious mental illness who live outside an institution, have the right to a subsidized group home or supportive housing, and fully funded medication and psychotherapy services as required.

#### Access to Senior's Care

17 Seniors have the right to Home Care services, including home support, occupational



and physical therapy, and nursing care, to enable them to remain as independent as possible and reside in their home and in their community as long as possible.

Seniors have the right to subsidized combination programs which allow older people to remain at home but link them with programs in the community, such as day health centres several times a week, where they receive meals, exercise and social contact.

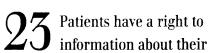
Seniors who need residential care have the right to access Long Term Care in their community within 90 days of referral. They have the right to a residential facility with 24 hour registered nursing care, medical coverage and recreational opportunities.

20 Seniors who need supportive housing (assisted living), have the right to access supportive housing in their community within 6 months of referral. They have the right to personal living spaces that allow for independence and privacy within a safe setting with adequate services as well as regular assessment by health care professionals. These forms of housing and care must be publicly regulated to ensure care standards.

Seniors in assisted living or long term care facilities, have the right to security of tenure so they are only moved after appropriate plans, services and accommodation have been put in place, and the family and resident have agreed to the plan.

Married seniors have the right to live together in the same long term care or assisted living facility if they both require care.

#### **Access to Information**





patient records, their medical condition and their care. They also have the right to have their personal health information protected from inappropriate use and/or disclosure.

Residents of British Columbia have the right to a health care system which is accountable and reports regularly on its performance through various mechanisms such as report cards. Patients have the right to know how well the health authority responsible for their treatment meets its performance contract with the Ministry of Health and how patient outcomes at the hospital to which they are referred, compare with those of other hospitals.

Patients in hospitals and residents in long term care and their families have the right to know the registered nurse to patient ratio in the facility, the ratio of other health care professionals to patients and any proven contravention of care standards, which have been reported to regulators.

 $26^{\circ}$  Patients must be provided with complete information about the services available to them and how to access those services.

# Let's protect and improve health care



Join with BC's nurses in supporting our Patient's Bill of Rights.

- Visit our website at www.bcnu.org and endorse the Patient's Bill of Rights.
   Also, tell us about your experiences with the health care system.
- Telephone BC Health Services Minister Colin Hansen and your local MLA\* and tell them that you support our Patient's Bill of Rights and they should too.

\*You can call the Health Services minister or your MLA by dialing toll free from Vancouver: 604-660-2421; Victoria: 250-387-6121; elsewhere in BC: 1 800 663-7867.

Claim your right to safe, high quality health care in BC

### PATIENT'S BILL OF RIGHTS



- O Nurses believe British Columbians have the right to safe, high quality health care.
- But across the province, service cuts are making health care worse:
  - Patients spend hours, sometimes even days, in emergency rooms waiting for a hospital bed.
  - People have to drive long distances on icy roads to a hospital.
  - Seniors are forced to leave their communities for care in a nursing home.
- That's why BC's registered nurses and registered psychiatric nurses have issued a Patient's Bill of Rights—to point the way to improvements.
- O Nurses are prepared to work with the public and the government to ensure all British Columbians get the care they need in hospitals, in the community and in nursing homes.

To read and support our Patient's Bill of Rights, or to tell us about your experiences with the health care system, visit us at www.bcnu.org

#### **ENSURING THE CARE WE NEED**

BC NURSES' UNION www.bcnu.org

Photo: Kate Williams

FROM:

## PATIENT'S BILL OF RIGHTS PRESENTATION TO RICHMOND CITY COUNCIL MAY 3, 2004

Good afternoon, Mayor and Ladies and Gentlemen. My name is Marnic Hewlett and with me is Marcia Sanford. I am a staff nurse at Richmond Hospital and Marcia lives in Richmond and works as a community nurse for the city of Vancouver. We would like to thank you for this opportunity to present, on behalf of the BC Nurses' Union, the Patient Bill of Rights. Each of you has a copy of the Patient's Bill of Rights.

The BC Nurses' Union has developed this Bill of Rights and are proposing specific improvements in the services and quality of care available to the citizens of British Columbia under our publically-funded healthcare system.

Nurses are committed to giving the best possible health care services and advocating for British Columbians when we see that their health care needs are not being met.

We believe that the residents of BC have the right to an effective publically funded and publically administered health care system consistent with the Canada Health Act.

We believe that the residents of BC have a right to timely access to care appropriate to their needs from qualified health care professionals. We also believe residents in both the hospital and the community setting have the right to choose their own physician.

We recognize the health care system does not currently have the capacity to meet patients' needs in all cases, and funding needs to be increased at both the federal and provincial levels in order to provide health care.

We also believe that provincial governments should meet with health providers and develop an implementation plan to improve the healthcare system over the next five years.

The following are some of the highlights of the Patient Bill of Rights:

For residents of urban and rural communities, the right to access an emergency department within a maximum of 30 minutes travel time.

For patients accessing an emergency ward, the right to be assessed immediately or admitted to a hospital bed or transferred to another hospital within six hours. I think everyone in this room is aware that long waits in hospital emergency departments have become the rule rather than the exception. Richmond Hospital has reported that this is definitely the case.

As well, maximum wait times for diagnostics, therapeutic, and surgical and rehabilitative treatment should be established through a public process that includes input from the public and healthcare providers. Again, we are all aware of the long wait lists especially for surgical procedures within our province and again Richmond has reported that our wait lists are among

the highest in the province.

Next, the right of palliative care patients to a choice whether they want to die at home, in a hospice or in a hospital palliative care bed.

As nurses we believe that patients and residents in long term care facilities have the right to an environment which is clean and safe, and the right to a choice of meals suitable for their dietary necds.

There should be a fully funded comprehensive health screening and education for children in schools.

Another tenet of the Patients' Bill of Rights is timely and appropriate care for patients requiring mental health care in the community. With the impending transfer of psychiatric patients from Riverview Hospital to the outlying communities and the downtown eastside, we are overloading a system that already cannot care for the current local population of patients with psychiatric disorders.

We are promoting supports for seniors to remain in their own homes or to access necessary housing or residential care when needed.

Finally, we advocate for patients' rights to information about their own care and about how their health care dollars are being spent. The public must be involved in deciding changes to our health care system.

The Patient's Bill of Rights presents both a challenge and opportunity for the Richmond City Council and the Vancouver Coastal Health Authority to engage in a dialogue with the public about the resources that are necessary to ensure patients get the care they need. The current situation must change and nurses are prepared to work with the federal, provincial and municipal governments, health authorities and the public to make sure change happens.

Today, on behalf of the British Columbia Nurses' Union we are presenting the Patient's Bill of Rights to ask for your endorsement of this document and commitment to work together with the public and nurses to ensure quality patient care.

I am also encouraging community and organizational leaders who believe in our public health care system to endorse the Patients' Bill of Rights.

We think that it is worth noting that the Health Minister, Colin Hansen, stated in The Province Feb. 18th, that he agreed in principle with most of the recommendations.

We need leaders, like yourselves, in our communities to tell the various levels of government that the deterioration of the health care system can be turned around if we all work together. So, my question to you is ...will Richmond City Council endorse the Patient's Bill of Rights ??? Thank you.