

5 Hospital Rules That Are Meant To Be Challenged

Empower employees to question certain rules when they or a family member is in the hospital.

By Betty Long, RN

Each industry has its own unique set of workplace operating procedures, rules and norms. Hospitals, like any other workplace, require rules. There are job descriptions that provide roles for employees, policies and procedures that exist to enhance patient safety, regulations that guide compliance with existing safety laws and, of course, employees who carry out all of those responsibilities.

But during the day-to-day operations of a hospital, just as in your organization, patients and families may bump up against rules that really aren't rules, but responses that have been crafted over time.

1. "I'm sorry, visiting hours are over." More hospitals are amending their visiting policies to be more inclusive. For a long hospital stay, check in with the nurse manager on the unit to understand what the established visiting policies are. If you anticipate a need for some flexibility, talk with her or him early on. Make sure that any decisions are communicated in writing to the appropriate resources - security, the nursing office and a copy for your family.
2. "The doctor is not able to speak with you." There is typically a hierarchy in place for physician coverage. In an academic tertiary-care center, the attending physician is the top of the food chain, while the intern or resident will likely be the most visible on the unit. In smaller, community hospitals doctors may work in shifts and oversee the care of patients. These physicians often are assigned weekly, so it can be troubling to families because it's a new face and a new style every week. Regardless, you are entitled to know which physician is making the decisions on treatment, how long the coverage period is (a week, a day, a weekend) and how you can reach the physician when you want to talk with him or her.
3. "I'm sorry, the nurse manager went home." In any hospital, during the evening or night shifts, there is a nursing supervisor who is working as the administrator or person in charge of the facility. Not only may they be responsible for staffing, but they should be making sure things are running smoothly. Should you not be getting the help or support you need from the clinical staff, get in touch with the nursing supervisor.
4. "We can't change your room." You can request that your room be changed. Tell your nurse and ask her to notify the nursing supervisor. It may have to wait until an appropriate bed opens up (after patients are discharged in the morning), but you can request a room transfer.
5. "We can't give you that information." This can be a terribly frustrating response for family members who call in to find out how their loved one is doing. Some facilities offer families a password. Anyone inquiring about a patient's status needs to know the password, usually established and protected by the family, and known by the staff. Once the caller shares the password with the staff, patient updates should be shared.

As with most workplace issues, communication is the best method to successfully resolve any hurdle. As you counsel your employees to provide customer service, know that they're entitled to the same when their loved one is in the hospital.

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