

## Lewis Blackman Patient Safety Act

Effective: July 1, 2016  
Reviewed by GMEC: April 12, 2016  
Initial Approval by GMEC: June 08, 2005

### Associated Policy (ies)

PH Corporate Compliance Program

### Responsible Positions (Title)

Residents & Fellows  
All Workforce Members

### Equipment Needed

*None*

### Procedure Steps, Guidelines, Rules, or Reference

1. **Name Badges.** All clinical staff, clinical trainees, medical students, interns, and resident/fellow physicians will wear badges clearly stating their names, using at a minimum either first or last names with appropriate initials, their departments, and their job or trainee titles. Clinical trainees, medical students, interns, and resident/fellow physicians will be clearly identified as such in terms or abbreviations reasonably understandable to the average person.
2. **Written Information Provided to Inpatients and Outpatient Surgery Patients.** Prior to or upon admission, the hospital admission staff will provide each patient with written information identifying the role of the attending physician and explaining that clinical trainees may participate in their care. The written information will be provided to all persons admitted to the hospital, registered in outpatient surgery and the emergency department. In all cases, the information will be provided in a document that is separate from the general consent for treatment. The acknowledgement of the receipt of the Lewis Blackman Hospital Patient Safety Act Letter will be included as part of the General Consent for Treatment form. The patient or their designee (Power of Attorney or Representative) will be asked to initial the Lewis Blackman Hospital Patient Safety Act portion of the General Consent form. During admission assessment, nursing will include the written information regarding the Lewis Blackman Hospital Patient Safety Act as part of orientation.
  - 2.1. The written information must:
    - 2.1.1. Explain that the patient's attending physician is the person primarily responsible for the patient's care;
    - 2.1.2. Explain that the patient's attending physician may change during hospitalization as their condition changes;
    - 2.1.3. Explain that the patient's nurse will help the patient contact the attending physician if the patient requests assistance;
    - 2.1.4. Explain that the hospital has established a patient assistance system to help resolve any concerns that may not require the attention of the attending physician; and

- 2.1.5. Instruct the patient how to access the patient assistance system.
- 2.2 When the hospital employs clinical trainees, the language below will apply. The written information will also include:
  - 2.2.1 An explanation of the roles of clinical trainees, medical students, interns, and resident/fellow physicians in patient care; and
  - 2.2.2 Notification that medical students, interns, or resident/fellow physicians may be participating in the patient's care (by making treatment decisions or by assisting or performing surgery on the patient).
3. **Contacting the Patient's Attending Physician.** If at any time a patient requests that a nurse call his or her attending physician regarding the patient's personal medical care, the nurse will place a call to the attending physician or his or her "physician---on---call" to inform him or her of the patient's concern. If the patient is able to communicate with and desires to call his or her attending physician or "physician---on---call", upon the patient's request, the nurse must provide the patient with the telephone number and assist the patient in placing the call. The "physician---on---call" does not include a resident/fellow. A nurse or other clinical staff to whom such a request is made or who receives multiple requests may notify his or her immediate supervisor for assistance.
  - 3.1. If assistance is needed to get the attending physician or physician---on---call to respond timely, workforce members should escalate the issue following the campus---specific *Chain of Command* policy/procedure.
4. **Patient Assistance System.** Palmetto Health will maintain a patient assistance system designed to help patients resolve their personal medical care concerns in a prompt manner. A mechanism (telephone number, beeper number, etc.) will be established that allows the patient to independently access the patient assistance system, and this mechanism may not require the patient to request assistance in order to access the system. However, a clinical staff member or clinical trainee must promptly access the system on behalf of a patient if the patient requests assistance. A representative of the hospital's administrative or supervisory clinical staff must be available at all times to respond to patient concerns. Once the patient assistance system has been contacted, the administrative or supervisory clinical staff representative shall promptly assess (or cause to be assessed) the patient's concern and provide appropriate follow up.
5. **Documentation.** Palmetto Health will document when a patient receives the written information and when a patient requests to speak to the attending physician.

## References

- S.C. Code of Laws, Article 27, Section 44---7---3410, Lewis Blackman Hospital Patient Safety Act
- S. C. Code of Laws, Article 27, Section 44---7---3430 of the 1976 Code, as added by Act 146 or 2005, Lewis Blackman Hospital Patient Safety Act
- Sponsoring Department: Corporate Compliance (803) 296-5044



Signature on File

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