

Policy Title: Patient, Family, and Visitor Discriminatory Requests or Behavior**Policy Number:** 1.2.22**Category:** UW Health**Type:** Ambulatory and Inpatient**Effective Date:** July 22, 2020**I. PURPOSE**

The purpose of this policy is to ensure safe, timely, culturally competent, and quality patient care while protecting staff from bias, discrimination and disrespect. UW Health is committed to a diverse, equitable and inclusive environment for all. Our integrity shines through in patient-care interactions and daily work practices as we embrace the knowledge, unique perspectives, and qualities each staff member brings to work each day. Additionally, UW Health embraces a team approach to patient care, where the involvement and input of the entire care team is valued.

II. POLICY ELEMENTS

- A. "Staff" or "staff member" is defined to include all employees, physicians, providers, non-employees training or performing work for UW Health, volunteers, and students.
- B. All patients, family members, and visitors are expected to respect the rights of staff. Any threats of violence, derogatory or bigoted comments, disrespectful communication or harassment of others for any reason, discriminatory or otherwise, will not be tolerated. This prohibition applies to all patients and their visitors, representatives and family members.
- C. Except as outlined in Section II.D., patient/family discriminatory requests or demands for a specific type of staff member based on characteristics of the staff member will not be accommodated. These characteristics include, but are not limited to, race, national origin/ethnicity, religion, creed, gender, gender identity or expression, genetic information, sexual orientation, age, disability, veteran or active military status, immigration status, marital status, political affiliation, color, and ancestry.
- D. In scheduled ambulatory situations, requests for providers based on desires for concordant, culturally and linguistically appropriate care will be respected. In all other situations, requests for gender-related accommodation may be considered if the request is due to cultural beliefs regarding modesty or for victims of sexual assault or other trauma.
- E. In all cases, the safety and rights of both the patient and staff must be considered and continually reassessed. Nothing in this policy is intended to interfere with the clinical judgment and decision-making of providers treating patients. See Appendix A: Physician and APP Decision Tool. This policy should be applied through the lens of trauma-informed care (See Appendix B: Trauma-Informed Care).

III. PROCEDURE

- A. If a patient, family member, or visitor engages in discriminatory behavior, such as bigoted questions, comments or language, any staff member who hears or witnesses the behavior should step in and let the patient know that this type of behavior will not be tolerated. Appendix C: Key Responses and Interrupting Microaggressions, is available to assist staff with communication.
- B. Patient/family requests or demands for a specific type of staff member are best handled by a team approach. Any staff member who hears or witnesses the request/demand should participate in addressing the patient's/family member's potentially discriminatory behavior. Regardless of whether the request or demand is received by an individual staff member or the team, the following steps should be followed.
 - i. The staff member(s) who receives the request or demand or a leader should acknowledge and clarify the reason for the request/demand.
 - ii. If the request/demand is based on any of the characteristics outlined in Section II.C. of this policy, the staff member(s) should explain UW Health's:
 - a. Commitment to a non-discriminatory environment
 - b. Reliance on our remarkable staff members to provide the highest quality health care and services
 - c. Assurance that the staff member is qualified and best positioned to provide the needed care/service to the patient/family.
 - iii. The staff member(s) should inform their leader or attending physician of the situation.
 - iv. The leader or attending physician should intervene on the staff member(s) behalf and provide support. If the situation is unable to be resolved in this way, Patient Relations should be contacted for assistance. Outside of business hours, Nursing Coordinators are available to

- assist. When warranted, these situations should be escalated to senior leadership, up to and including the Chief Medical Officer and Chief Nursing Officer.
- C. In all cases and when circumstances allow, the following steps should occur:
- i. Discuss options with the patient/family and health care team. There should be open dialogue with the patient/family about the reasons for the request, implications to care/service refusal, and setting behavioral expectations. This dialogue may be enhanced by involving others, such as Patient Relations, Social Work or, if appropriate, Spiritual Care.
 - ii. Provide clinical care and support to the patient/family while next actions are being determined.
 - iii. Provide support to staff member(s). The leader will assess the ongoing needs for staff support and follow-up. This may involve engaging resources such as Patient Relations, Diversity, Equity and Inclusion department, Employee Health Services, and/or Employee Assistance Program (EAP) to meet with staff and provide support.
 - iv. Consider UW Health Clinical Policy #1.2.21, Patient Rights and Responsibilities.
 - v. Consider UW Health Clinical Policy #3.3.5, Participation of Patients' Primary Supports and Visitors
 - vi. Consider UW Health Clinical Policy #2.4.7, Disruptive Behavior: Prevention and Management
 - vii. Consider transfer of care
 - viii. Document discussions and actions in the electronic health record.
- D. In cases of an imminent threat or immediate safety crisis, staff should follow their building specific procedures. Refer to UW Health Clinical Policy #5.1.16, Emergency Response Teams (Adult and Pediatric).
- E. If a patient's request for a different staff member is denied, and the patient refuses care, the care team should follow the processes outlined in UWHC Policy #8.24, Guidelines for Treating Patients When They Refuse Medical Treatment, and UWHC Policy #4.19, Discharge Against Medical Advice/Elopement from Hospital.
- F. If an affected staff member believes the professional relationship is broken and no longer in the best interests of the patient and staff member, the option to have a different staff member resume care may be considered, in consultation with the leader, attending physician, and/or Patient Relations.
- G. Following the resolution of an event prohibited by this policy, a report should be entered into the Patient Safety Net (PSN) System. PSN reports occur after the event and do not substitute for immediate or urgent communications that may be needed during an event, such as contacting Security or law enforcement.

IV. FORMS

N/A

V. COORDINATION

Author: Chief Diversity Officer

Senior Management Sponsor: VP, Deputy General Counsel, Legal Operations, Risk & Regulatory

Reviewers: Director of Patient and Family Experience; Legal;

Approval committees: UW Health Clinical Policy Committee; Medical Board

UW Health Clinical Policy Committee Approval: June 15, 2020

UW Health is a cohesive, united and integrated academic medical enterprise comprised of several entities. This policy applies to facilities and programs operated by the University of Wisconsin Hospitals and Clinics and the University of Wisconsin Medical Foundation, Inc., and to clinical facilities and programs administered by the University of Wisconsin School of Medicine and Public Health. Each entity is responsible for enforcement of this policy in relation to the facilities and programs that it operates.

VI. APPROVALPeter Newcomer, MD
Chief Clinical OfficerBrian Arndt, MD
Chair, UW Health Clinical Policy Committee**VII. REFERENCES**



UW HEALTH CLINICAL POLICY

Policy Title: Patient, Family, and Visitor Discriminatory Requests or Behavior

Policy Number: 1.2.22

- A. Appendix A: Physician and APP Decision Tool
- B. Appendix B: Trauma-Informed Care
- C. Appendix C: Key Responses and Interrupting Microaggressions
- D. UW Health Clinical Policy #1.2.21, Patient Rights and Responsibilities
- E. UW Health Clinical Policy #3.3.5, Participation of Patients' Primary Supports and Visitors
- F. UW Health Clinical Policy #2.4.7, Disruptive Behavior: Prevention and Management
- G. UW Health Clinical Policy #5.1.16, Emergency Response Teams (Adult and Pediatric)
- H. UWHC Policy #8.24, Guidelines for Treating Patients When They Refuse Medical Treatment
- I. UWHC Policy #4.19, Discharge Against Medical Advice/Elopement from Hospital

VIII. REVIEW DETAILS

Version: Original

Last Full Review: July 2020

Next Revision: July 2023

Formerly Known as: N/A