The Role of Medical Staff in Providing Patients Rights

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ABSTRACT

Among the priority basic human rights, without a doubt, are the right to life and health-social protection. The process of implementation of human rights in the everyday life of an ordinary citizen in the post-war recovery of Bosnia and Herzegovina faces huge objective and subjective difficulties. Citizens need to be affordable adequate healthcare facilities that will be open to all on equal terms. The term hospital activity implies a set of measures, activities and procedures that are undertaken for the purpose of treatment, diagnosis and medical rehabilitation of patients in the respective health institutions. Principles of hospital care should include: Comprehensiveness (Hospital care is available to all citizens equally); Continuity (Provided is continuous medical care to all users); Availability (Provided approximately equal protection of rights for all citizens). Education of health professionals: The usual threats to patient safety include medical errors, infections occurred in the hospital, unnecessary exposure to high doses of radiation and the use of the wrong drug. Everyday continuing education in the profession of a doctor is lifelong.

Key words: patient's rights, accreditation, evaluation, education, health care quality

1. INTRODUCTION

Universal Declaration of Human Rights is the basic international legal instrument adopted 1948, which guarantees freedom, justice and peace among people. Article 3 of the Declaration states: "Everyone has the right to life, liberty and safety"—right to the highest standard of health (which refers to the "right to health") (1). Issues arising from the implementation of the International Covenant on Economic, Social and Cultural Rights E/C 12/2000/2. CESCR (Committee on Economic, Social and Cultural Rights). Any person, group, or a victim of violations of the right to health should have access to effective legal or other solutions both at the national and international level. To all victims of such violations should be given the right for adequate remedy, which may take the form of restitution, compensation, satisfaction or guarantees that it will not happen again. State Ombudsman, Human Rights Commission, the consumer forum, an association that deals with the rights of the patient or similar institutions should be able to deal with the right to health (1).

Among the priority basic human rights, without a doubt, are the right to life and health-social protection. The process of implementation of human rights in the everyday life of an ordinary citizen in the post-war recovery of Bosnia and Herzegovina faces huge objective and subjective difficulties. Citizens need to be affordable adequate healthcare facilities that will be open to all on equal terms. The term hospital activity implies a set of measures, activities and procedures that are undertaken for the purpose of treatment, diagnosis and medical rehabilitation

of patients in the respective health institutions. In the institution of hospital/inpatient type huge role of health professionals is in the exercise of the rights of patients in the provision of timely and appropriate health care. With its invitation health professionals from the classrooms out two rooted myth—that one of perfection and that one of punishment. The myth of perfection says: if you try hard enough in your work, the error cannot occur. Another myth says if you punish those who make mistakes, they will not repeat it. Preventing errors and improving safety for patients requires a systemic approach to act in those situations that contribute to the occurrence of errors. Their work health professional should be implemented without discrimination, in accordance with professional ethics. Its role is significant for the rights of patients, especially in ensuring adequate health care (2).

2. ACCREDITED STANDARDS FOR THE HEALTH PROFESSION

Agency for Quality and Accreditation in Healthcare of Federation B&H (AKAZ), headquartered in Sarajevo was established in 2003rd as the backbone of the organizational structure that acts in an effort to improve the quality and safety of health care in the Federation. Its main task is the development of organizational and clinical standards for primary health care and hospital system, assessment of the quality of health care institutions that are applied for accreditation, coordination and networking of health institutions are required by law directly address the assessment of safety and quality. Policy defines the measur-

ing, monitoring and improving standards of clinical practice and management services. Law on the improvement of quality, safety and Accreditation in Health Federation consists of 63 articles which are divided into 6 sections. The law cannot prescribe quality, nor is it possible to inspect the quality of health care institutions. Quality can only be evaluated by health care professionals equal to those evaluated (2). Health professionals in the hospital of general type, too, must undergo systematic training procedure at the level of accreditation in their profession in order to reduce errors and improve access to satisfied patients.

Principles of inpatient care

- Principles of hospital care should include:
- Comprehensiveness (Hospital care is available to all citizens equally);
- Continuity (Provided is continuous medical care to all users);
- Availability (Provided approximately equal protection of rights for all citizens).

3. WHEN THE PATIENT'S RIGHTS HAVE BEEN VIOLATED?

Health care professionals must begin to talk about their mistakes, as well as solutions for their prevention and sanctions, through existing legislation or some other new acts and documents. They need to talk with other professionals who are responsible for this important segment of the science and profession. *Therefore medical law is our necessity.* Medical law is an integrated system of standards that have been compiled in a single legislative act, rather it is a set of different ethical standards and legal regulations about medical activity and properties of the people in this activity and their relationship to health service users. Legal texts that treat a wide field of health rights belong to the different areas of law, such as constitutional, criminal, civil, administrative, family, occupational, social, international, etc. (3). However, there is a tendency that these different sources of medical law gather in one place to form a new discipline that would equally be studied in biomedical and law schools (4).

In addition to professional and specialist exams where health professionals must demonstrate their knowledge in this field, on this area should be more discussed also at the workplaces. Springing up everywhere are patient's forums (5), which are increasingly involved in strengthening their own security, held numerous conferences (6) dedicated to risk management, prepare recommendations to improve security of services (7). Patient safety is emphasized in the forefront of health projects and initiatives that actively involves the WHO (8), the Council of Europe, European Commission, OECD (9), Ministry of Health, etc. (1, 5). In Article 10, Statements about the existence of the need for adoption of a Charter of Patients' Rights in Bosnia and Herzegovina (11), has a fundamental right to patient safety. The latest recommendations of the Committee of Ministers of the European Council (1) obliges member states to build systems for patient safety that is based on creating a culture of safety, assessing patient safety in health care facilities, the use of indicators, reporting on incidents that impair the safety, better use of information and sources

of information on patient safety, strengthening the role of patients and citizens, education, research in this area, the implementation of national policies and the quality of the legal framework established (1) (Table 1).

We can identify some typical symptoms related to violation of human rights. People are afraid to talk about what happened to them. Health Organization and the official structures often are afraid to explore and evidence to substantiate these events. May cast doubt or deny them which is really happening. People are reluctant to ask for help and may not know their rights (1, 3). The area of health professionals delves deep into the mental and physical integrity of human beings, and thus gives a great potential for distortion of integrity. The extent to which a person as a patient or health care facility during the diagnosis, treatment or medical care, really protected in the health system, is a question that the modern and developed societies has significant legislative basis.

4. POLICY AND HEALTHCARE QUALITY

Quality assurance includes assessment of the current level of quality and corrective action in order to rectify the deficiencies. In most countries of the world assessment and quality assurance are in most cases in hospitals, and one of the reasons for this is that hospital care is very expensive and requires strict control of spending resources. Quality can be defined as the degree of perfection of some services or products ranked among themselves, or to suit the purpose, meeting the needs of users (Healy 1988) (2). Quality, in essence, is the responsibility of all: the population of actual patients, potential patients, decision service, principal and the contractor services. Good quality means that health care meets the needs of, individuals, families or communities and is provided under the best and most suitable conditions (WHO, 1997) (2, 8).

5. GUIDELINE AND/OR WORKSHOPS IN THE HEALTH CARE SYSTEM

The key competencies of health professionals are required ability to protect, maintain, and restore the health of individuals, their vital, physical and mental functions with respect to their characteristics, psychological, social, economic, and cultural characteristics. Health professional initiates and takes measures to promote health and prevent disease of the individuals, families and communities. Guidelines and workshops in the health care system needs to be understood as an opportunity for orientation in the health care system in which the rationalization and rationality is essential (1, 3).

Feelings of the patient that its wishes and needs are met implies good effect. Experience is related to subjective standards or set of values and expectations. Deviation will occur only in the case of large differences between experienced and expected, or where there is the negative set of standards. Although attempts to improve the quality of health care are as old as the art of therapy, as it is mentioned in the 19th century BC (Hammurabi's Code), the discussion about what quality actually represents is not yet completed. Also, there are debates about how to measure the level of health and disease, as well as the basic elements in the control and management of quality

Kinds of Patient Rights	RUSSIA	UKRAINE	ARMENIA	GEORGIA	FYR MACEDO-NIA	KAZAKHSTAN	KYRGYZSTAN
Right to preventive measures	+	+	+	+	+	+	+
Right on access to health care	+	+	+	+	+	+	+
Right to information	-	+	+	+	+	+	+
Right to informed consent	+/-	+	+	+	+	+	+
Right for free choice	+	+	+	+/-	+	+	+
Right to privacy and confidentiality	-	+	+	+	+	+	+
Right to respect the patient's time	+	+	+	+	+	+	+
Right to monitor quality standards	+/-	+	+	+	+	+	+
Right to the safety	+	+	+	+	+	+	+
Right to innovations	+	+	+	+	+	+	+
Right to avoid unnecessary pain	+	+	+	+	+	+	+
Right to PT	+	+	+	+	+	+	+
Right to appeal and the right to compensation	+	+	+	+	+	+	+

Table 1. Respect for patient rights in the Health Care Systems in seven countries in transition. Legend: (+) - the right is fully respected; (-) - the right is not respected; (+/-) - the right is partly respected; PT - Personalized treatment

health care. The quality of health and health care is one of the most complex states and functioning of the health system. Quality of health care is the level of insured health services to individuals or households who meet the likelihood of desired health outcomes compared to standard care. Particular attention should be paid to patients' rights and data protection in medicine as it touches on the rights of patients to their own privacy, guaranteed by the Declaration on the Rights of Patients (Amsterdam) (1).

6. RIGHT/S OF THE PATIENTS TO HEALTH IN ACCORDANCE WITH THE PRINCIPLES OF MEDICAL DEONTOLOGY

Medical deontology is the science of professional duties, the moral actions of health professionals and their morals in professional medical activities. The primary document that defines and promotes the rights of patients to health is the Charter of Patients' Rights, which must contain the following postulates and clauses:

- The right to health is a fundamental right of every human being;
- Every man is entitled to the highest level of health;
- All countries are responsible for the health of its population, through the provision of health and social care;
- Every patient has the right that his/her privacy is respected.

Rules and duties of citizens in accessing health care services are defined by Law published in the Official Gazette of the Federation B&H in 1997. According to the document, in accessing health care services every citizen has the right to (1):

- Accessible health service of standard quality and equal content established by rules of health insurance;
- Compensation for damages inflicted by providing inadequate health care, in the case of proven pro-

fessional errors;

- Free choice of family doctors, medical doctors and dentists in accordance with the laws and regulations of health insurance;
- Immediate emergency medical care at a time when is needed;
- Precise information and training on all matters relating to his/hers health;
- Refusing to be the subject of scientific research or any other examination or medical treatment without the consent;
- Choice of alternative forms of medical treatment, which offers a medical doctor or dentist, excluding urgent interventions whose refusal would endanger the life and health of citizens and cause permanent damage;
- Confidentiality of all data relating to the state of patients health;
- Refusal of examination and treatment by a medical doctor or a dentist because of losing confidence;
- Refusing surgical or other medical intervention, if the patient is conscious or capable of reasoning, if the doctor pointed to the harmful consequences to patient's life and health in the event of rejection of such interventions. For persons who are unconscious or not capable of reasoning, this consent is provided by the parents, guardian, spouse or other closer relatives, unless there is danger to life or injury, and because of the urgency it is not possible to obtain timely approval;
- Nutrition in accordance with the religious rules while in inpatient medical institution, which is not contrary to the prescribed medical diet;
- Performance of religious rites while in inpatient medical institution in a designated area, including the right equipment at the morgue in the event of death, with the use of religious rites-separated by confessions.

In the context of the principles health professional should conduct his/hers work conscientiously and professionally by the principles of medical deontology. Should be familiar with their legal and moral responsibilities. Health care professionals are required to keep the information they learn in the course of duty to the patient. That obliges us Hippocratic Oath: „What in my work I have seen or heard withhold will keep it a secret“ (2, 3). Violation of legal obligations leads to legal and judicial accountability. Moral beliefs are a reflection of the time, current, social circumstances and conditions. Ethics and religion, each in its own way, leads us to the ancient idea: Let's save the one man seemed to have saved the whole world. At the same time, if you destroy a human life, as you destroy the world (2).

7. THE DUTIES OF HEALTH PROFESSIONALS

Health professionals working in hospitals of general type are required to carry out their professional duties in accordance with the postulates of the Hippocratic Oath, the ethical principles of medical deontology and internal regulations which are determined by professional duties and obligations.

Some of the consequences of poor professional performance may manifest as:

- Nosocomial infections;
- Postoperative wound infections;
- Postoperative pulmonary infections;
- Misapplication of drugs;
- Anesthetic events;
- Occurrence of pressure ulcers.

The consequences of nosocomial infections can be a serious illness, prolonged hospital stay, increased cost of treatment, the need for additional antimicrobial therapy, additional risk of side effects, and pressure for the development of resistant nosocomial pathogens or, in the worst case, death of the patient. The infected patient is a source of infection for other patients (5, 7).

Health care professionals in hospitals general type professional conduct and activities may affect to achieve:

- Eliminating sources of infection in hospital environment;
- Interrupt transmission of the infection from the source to the sensitive host;
- Increase defensive capabilities of the host.
- Adverse events should be distinguished from complications of the correct application of treatment, while iatrogenic (undesirable) injuries are due to errors of health professionals.

The total number of errors can be drastically reduced by the following:

- Pre strengthen the knowledge base and safety;
- Encouraging voluntary and regulate mandatory system of reporting errors;
- Set standards for safe health care and professional associations of health professionals;
- Test, follow-up, monitor and improve standards related to safety;
- Creating safety systems in healthcare institutions.

The health professional can be held responsible for the following crimes (1, 3, 8):

- Failure to provide regular medical care;
- Criminal abortion;
- Euthanasia;
- Disclose such information;
- Crime in the case of infectious diseases;
- Malpractice;
- Manufacture and sale of hazardous drugs;
- Sexual crimes;
- Issuing false certificates.

The responsibility of health care professionals can be:

- Individual;
- Institutional.

Violated rights of patients which receive health services in hospitals of general type can be determined in several ways. The most common and most effective are:

- Survey of users of health care services;
- Application of appeal forms to consumers of health services;
- Application of the chief medical technician institution informs the director on the survey or the appeal leaflet. It entering data into electronic form/database, a survey and appeal papers are kept as a permanent document;

- All data in physical or electronic form are going to be seen by the hospital director;
- Doctor, nurse conducts and interview with the director of the hospital and a written statement;
- The decision on sanctions for doctors, nurses makes hospital director;
- If the patient right is violated due to unprofessional work of doctor, nurse, patients is further seeking its rights enshrined in the Law on the Rights of the patient;
- All survey and appeal papers are kept and presented to the appropriate inspection from the health sector;
- All data in physical or electronic form are going to be sent to the Ministry of Health;
- After the analysis of the patient's complaints and recommendations established strategies and measures to eliminate and punish adverse events and actors.

It is important to note that the relevant legal acts in healthcare require that health care professionals in their work should provide a certain standard of knowledge, skill and care in the provision of health care. Of health professionals is required professional, sensible and humane approach to the treatment. Medical errors in healthcare practice occurs most often for organizational and technological-technical causes. Then follows reasons of poor organization of work (usually no protocols in health care organizations), the reasons for poor medical-technical equipment and health services. Important causes of medical errors are due to poor training, which specifically deals segment of medical deontology (1, 2, 3, 8, 9).

8. EDUCATION OF HEALTH PROFESSIONALS

As the health care is subject of scientific research of all health professionals, all the principles of scientific work are related to them. Special role of nursing as a profession, which must develop theories and models of care. Nursing care must be organized, must have the right to an autonomous professional expertise and have their professional ethics. In order to achieve this, it is essential the existence of safe organizational model.

The key competencies of health professionals are required ability to protect, maintain, and restore the health of individuals, their vital, physical and mental functions with respect to their characteristics, psychological, social, economic and cultural, initiate and undertake measures to promote health and prevent disease of the individual, family and community.

CONFLICT OF INTEREST: NONE DECLARED

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