

Greenwich Hospital Greenwich, Connecticut 06830		HUMAN RESOURCES POLICY AND PROCEDURE	
Title: STAFF RIGHTS			Policy #: A5
Date Issued: 6/25/95	Date Reviewed/Revised: 8/30/01, 2/3/10, 10/22/15	Approved By: Frank A. Corvino, President/CEO	Page 1 of 4
Contact: Human Resources Representative			

PURPOSE:

The primary concern and objective of Greenwich Hospital and its employees is to provide quality patient care and/or treatment, at all times, to all of our patients. This objective and concern may never be compromised.

POLICY:

Greenwich Hospital recognizes there are specific aspects of patient care and/or treatment that may conflict with an employee's personal cultural values, ethics and religious beliefs. The Hospital respects the cultural values, ethics and religious beliefs of its staff but at the same time it must ensure that quality, appropriate patient care is provided.

This policy applies to all Hospital employees providing patient care and/or treatment; and all job applicants for patient care positions.

PROCEDURE:

This policy pertains to those specific aspects of patient care and/or treatment, which are intervention in nature and may be objectionable to an employee or job applicant because of strongly held cultural values, ethics and religious beliefs.

Specific aspects of patient care which are intervention in nature, include the following but are not limited to:

- Blood and blood component administration
- Termination of pregnancy
- Initiation and cessation of life support
- Administration of pharmacological agents to terminally ill
- Assisting with the harvesting of human organs
- Sterilization procedures
- Reproductive technologies

Employees are required to submit a written request (Staff Rights Accommodation Form, page 3 of this policy) to their manager when the employee first becomes aware of the expectation to perform such aspects of patient care and/or treatment. This notice may not be provided when a patient is in need of immediate care and/or treatment.

The Staff Rights Accommodation Form includes the basis of the conflict and a detailed explanation of how the specific aspect of care and/or treatment is in conflict with the employee's cultural values, ethics and religious beliefs.

If the request is granted to the employee, their Manager/Department Head must ensure that patient care is not compromised by providing coverage or sufficient reassignments.

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If the request is denied the employee is expected to perform all duties of their position. The employee has a right to appeal this denial in accordance with the Grievance Policies. A decision rendered as a result of the grievance process is final.

If an on-going request by an employee not to participate in an aspect of patient care and/or treatment has a negative effect on a department to provide safe and consistent patient care and/or treatment, continued employment in that department is assessed by the employee's Manager/Department Head, Ethics Committee, Medical Care Administration and Human Resources.

During the recruitment process job applicants are informed of specific aspects of patient care and/or treatment which are intervention in nature and are considered part of their job responsibilities.

If the applicant indicates that such specific aspects of patient care conflict with their cultural values, ethics and religious beliefs it may be noted on their job application and may result in the applicant not being hired; and the applicant is informed of other vacant positions in the Hospital, provided the applicant is qualified for the position.

RESPONSIBILITY:

The employee's Manager/Department Head, Ethics Committee, Medical Care Administration and Human Resources are responsible for all decisions under this policy.

REFERENCES:

Please see the Staff Rights Accommodation Form on page 3 of this policy.

RELATED POLICIES:

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**GREENWICH HOSPITAL
STAFF RIGHTS ACCOMODATION FORM**

The Staff Member who is requesting a special accommodation should complete this form and submit it to his/her manager. For additional space, please use blank sheet.

PART 1

Name: _____ Title: _____

Department: _____ Phone ext: _____

1. Please describe the tasks, duties and aspects of treatment/care of the patient that are expected of you for which you are requesting an exception:

2. Please explain your reasons for not wishing to participate in the task duties and treatment/care of the patient described above.

Employee Signature: _____ Date: _____

Manager Signature: _____ Date: _____

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PART II

This section is to be completed by the manager. Please describe the accommodation you are prepared to provide. If you have not granted a special accommodation, please explain the reasons why.

Manager Signature: _____ Date: _____