

Law and healthcare



**ASSIGN
BUSTER**

Justify your position about the importance of the physician-patient and hospital-patient relationships. In a typical physician-patient relationship, the physician usually agrees to diagnose and treat the patient according to the standards of accepting medical practice and to continue doing so until the termination of treatment. A patient must have confidence in the competence of their physician and must feel that they can confide in him or her. This is always good, when you feel comfortable in talking to your physician things are so much better and it makes you feel secure.

As, with my doctor I have been with her since I was sixteen years of age and we have a magnificent physician-patient relationship. At appointments we talk about the nature of the visit, what can be done to correct problem or problems if any, and last but not least the solution to the problem. From time to time we talk about other things going on in both of our lives and that's special to me because most physicians, just want to see you and send you on your way and to have that good physician-patient relationship is so important. The quality of the patient-physician relationship is important to both parties.

The better the relationship in terms of mutual respect, knowledge, trust, shared values and perspectives about disease and life, and time available, the better will be the amount and quality of information about the patient's disease transferred in both directions, enhancing accuracy of diagnosis and increasing the patient's knowledge about the disease. Where such a relationship is poor the physician's ability to make a full assessment is compromised and the patient is more likely to distrust the diagnosis and

proposed treatment, causing decreased responsibility to actually follow the medical advice.

The outcome service of hospitals begins with the patient's perception of caring and concerned physicians who demonstrate attributes of attentiveness, dignity and respect, effective information transfer, and shared decision making. This leads to the patient satisfaction and loyalty that results in patients who will return to the hospital, seek related business, and refer additional business. Patient satisfaction is a highly desirable outcome of clinical care in the hospital and may even be an element of health status itself.

A patient's expression of satisfaction or dissatisfaction is a judgment on the quality of hospital care in all of its aspects. Whatever its strengths and limitations, patient satisfaction is an indicator that should be indispensable to the assessment of the quality of care in hospitals. 2. Determine how contract principle and breach of warranty apply to the health care setting. In a physician-patient contract, usually the physician agrees to perform a specific service and failure to perform the service with reasonable skill and care can give the patient a reason for filing a claim for breach of contract.

For example in the *Alexandridis v. Jewett* Case where two obstetricians agree that one of them would personally deliver the patient's second child, but when time came for the child to be delivered neither physician could make it to the hospital and a first-year resident delivered the baby. During the delivery the patient's anal sphincter was damaged. Because of the partners agreement to delivery the baby and neither none of them did they were held

liable for breach of contract. A physician who uses a procedure that is different from the one he promised may also be liable for breach of contract.

Physicians are accountable to liability not only if they promise to perform a certain service but if they promise a particular result. A physician who promises a result gives the patient a contract basis for a lawsuit if the procedure is not successful. For example in the Sullivan v. O'Connor case where a professional entertainer thought her nose was too long and she contracted with this physician to have cosmetic surgery. The physician promised that the surgery would enhance beauty and improve her appearance.

The surgery was not a success and after two more operations the surgery looked worse than before. Physicians do not guarantee results by agreeing to perform an operation, and it's hard to draw the line between an opinion and a guarantee. The court decided in this case the physician broke the breach of warranty and the jury verdict was for the plaintiff. 3. Analyze the four elements of proof necessary for a plaintiff to prove negligence. Negligence is the most common type of liability case that healthcare organizations face.

It often occurs when a person fails to hold up to the accepted standards of behavior. There are four elements essential to proving negligence: 1. a duty of care, Duty is a legal obligation the defendant owes to the plaintiff. In a negligence case the duty is most commonly expressed as a general obligation to act with care in other words to conduct oneself as a reasonably prudent person would do in similar circumstances. 2. Breach of that duty: A breach of duty occurs when one person or company has a duty of care toward another person or company, but fails to live up to that standard.

A person may be liable for negligence in a personal injury case if his breach of duty caused another person's injuries. Once the duty has been established, the plaintiff must show that it was breached by presenting evidence of the facts of the case and testimony from expert witness which is usually the same witness who established the duty in the beginning. 3. injury: Damage or harm done to or suffered by a person or thing: 4. Causation is the "causal relationship between conduct and result". That is to say that causation provides a means of connecting conduct with a resulting effect, typically an injury.

In criminal law, it is defined as the actus reus (an action) from which the specific injury or other effect arose and is combined with mens rea (a state of mind) to comprise the elements of guilt. Causation is only applicable where a result has been achieved and therefore is immaterial with regard to inchoate offenses. 4. Discuss the function and responsibilities of the governing board of a health care corporation. The duty of responsibility is to act with due care in every activity of the board. Good faith and honesty are the two major tests in determining whether due care has been done. The Governing Board's Duties are as following;

Governing boards of public and independent institutions bear an abiding responsibility to preserve and enhance a legacy of learning, scholarship, and free inquiry that is unique to the college or university. As fiduciaries accountable for the public trust that's placed in higher education, they must also exemplify the highest standards of integrity. To accomplish these goals, a board is accountable to fulfill the following basic responsibilities. Basic Responsibilities of Governing Boards • Establish, disseminate, and keep

current the institution's mission. At public institutions, ensure that the mission is aligned with public purposes. Recruit, appoint, support, and evaluate the chief executive officer to lead the institution. • Charge the chief executive with the task of leading a strategic planning process, participate in that process, approve the strategic plan, and monitor its progress. • Ensure the institution's fiscal integrity, preserve and protect its assets for posterity, and engage directly in fundraising and philanthropy. • Ensure the educational quality of institution and its academic programs. • Preserve and protect the institutional autonomy and academic freedom. • Ensure that institutional policies and processes are current and properly implemented. In concert with senior administration, engage regularly with the institution's major constituencies. • Conduct the board's business in an exemplary fashion and with appropriate transparency, adhering to the highest ethical standards. Ensure the currency of board governance policies and practices, and periodically assess the performance of the board, its committees, and its members.

6. Emanuel EJ, Dubler NN. Preserving the physician-patient relationship in the era of managed care. *JAMA*. 1995; 273(4): 323-9. [PubMed] References Effective Governing Boards (for boards of public institutions). 2009.