COMMUNITY HOSPITAL

McCook, Nebraska

PATIENTS' RIGHTS AND RESPONSIBILITIES STATEMENT

INTRODUCTION

Community Hospital strives to deliver quality patient care by supporting patient rights and responsibilities as an integral part of the healing process. It is recognized that a personal relationship between the physician and patient is essential for the provision of proper medical care. The traditional physician and patient relationship takes on a new dimension when care is rendered within the hospital's organizational structure. Precedent has established that the institution itself also has a responsibility to the patient. It is in the recognition of these factors that these rights are affirmed.

PHILOSOPHY

To treat ALL -- regardless of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or source of payment for care—and maintain human dignity in time of illness.

MISSION STATEMENT

Regional Healthcare Excellence.

In order to fulfill this mission, the hospital, Medical Staff and the patient/parent(s)/guardian(s) must acknowledge the existence of shared obligations, based upon patients' fundamental rights and responsibilities. These patient rights are:

PATIENT RIGHTS

Access to Care

Individuals shall be accorded impartial access to treatment or accommodations that are available or medically indicated (within the capabilities of the staff and facilities) regardless of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, or source of payment for care. This includes individuals with any communicable diseases and any patients with drug or alcohol addictions suffering from a medical condition not related to their addiction. Patients have the right to receive the appropriate level of care/services, including end of life care.

Respect and Dignity

The patient has the right to considerate, respectful care at all times and under all circumstances, with recognition of their personal dignity, value and belief systems.

Privacy and Confidentiality

The patient has the right, within the law, to personal and informational privacy, as manifested by Version 9/2020

the right to:

- a. refuse to talk with or see anyone not officially connected with the hospital, including visitors or persons officially connected with the hospital but who are not directly involved in the their care.
- b. expect that any discussion or consultation involving the their case will be conducted discreetly, and that individuals not directly involved in their care will not be present without their permission.
- c. wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- d. be interviewed and examined in surroundings designed to assure reasonable audiovisual privacy. This includes the right to have a person of one's own sex present during certain parts of a physical examination, treatment or procedure performed by a health professional of the opposite sex; and the right not to remain disrobed any longer than is required for accomplishing the medical purpose for which the patient was asked to disrobe.
- e. Have privacy during personal hygiene activities. If assistance is needed during these activities, it will be given with the utmost attention to the individual's need for privacy.
- f. have their medical record read only by individuals directly involved in the their treatment or the monitoring of its quality, and by other individuals only on the patient's written authorization or that of the patient's legally authorized representative.
- g. access, request amendment to, and receive an accounting of disclosures regarding their own health information as permitted under applicable law.
- h. review their own medical record within the limits of the law.
- i. expect all communications and other records pertaining to their care will be treated confidentially, except in cases such as suspected child abuse and public health hazards requiring to be reported by law.
- j. request a transfer to another room or area if a patient or visitor in that area is unreasonably disturbing him.
- k. be placed in protective privacy when considered necessary for personal safety and have access to protective services.

Education

The patient has the right to receive education about treatments, procedures, medications, their disease/illness and other information as appropriate.

Personal Safety

The patient has the right to expect reasonable safety insofar as the hospital practices regarding environmental safety, infection control, and security.

Information

The patient has the right to obtain, from the practitioner responsible for coordinating their care, complete and current information concerning their diagnosis (to the degree known), treatment, Version 9/2020

information about risks and benefits related to treatment/research and investigational studies and any known prognosis or outcome, including unanticipated outcomes. This information should be communicated in terms the patient can reasonably be expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to a legally authorized individual.

The patient has the right to know the identity and professional status of individuals providing service to them, and to know the physician(s) or other practitioner(s) is primarily responsible for their care. This includes the patient's right to know of the existence of any professional relationship among individuals who are treating him, as well as the relationship of the hospital to any other health care or educational institutions involved in their care. Participation by patients in clinical training programs or in the gathering of data for research purposes would be voluntary.

Communication

The patient has a right to communication in a manner that meets the patient's oral and written communication needs, including the need for personal devices such as hearing aids or glasses, language interpreters, communication boards and plain language materials. Community Hospital strives to provide information in a manner tailored to the patient's age, language, and ability to understand.

Notification of Physician

The patient and patient representative has the right to request that Community Hospital notify their primary care physician of their hospitalization. Community Hospital will make reasonable efforts to make such notification in a timely manner upon requests.

Visitation

The patient has the right of access to people outside the hospital by means of visitors, and by verbal and written communications.

A visitor is defined as any individual the patient wishes to allow to visit them during their stay or visit, subject to limitations described below. A support person or personal advocate is an individual that the patient wishes to designate to help support them during their stay or visit. A Representative Decision Maker generally has rights to make decisions for the patient in the event the patient is unable to make decisions for themselves. The rights and responsibilities of the support person or personal advocate and of the Representative Decision Maker are discussed further with the "Representative Decision Maker" section of this document.

Community Hospital allows a family member, friend, or other individual to be present with the patient for emotional support during the course of stay. The Hospital allows the presence of a support person of patient's choice unless the presence infringes on others' rights, safety or is medically or therapeutically contraindicated. The patient has the right to receive the visitors whom he or she designates, including but not limited to a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and their right to withdraw or deny such consent at any time. Visitation is not restricted, limited, or otherwise denied on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity or disability.

All visitors designated by the patient (or representative, where appropriate) enjoy visitation privileges that are no more restrictive than those that immediate family members would enjoy.

The hospital may impose clinically necessary or reasonable restriction or limitation and it is the right of the patient to have the reasons for the clinical restriction or limitation explained by the attending physician or nursing staff.

Care Plan

The patient has a right to participate in the development and implementation of his or her plan of care including the right to information regarding the patient's health status, diagnosis and prognosis, participate in the development and implementation of their treatment or care plan and to participate in the development and implementation of their discharge plan. The patient or patient representative may request a discharge planning evaluation. Medicare beneficiaries have the right to appeal a discharge decision if they feel they are being discharged prematurely.

Consent

The patient has the right to reasonable informed participation in decisions involving their health care, including consent for recording or filming made for purposes other than identification, diagnosis or treatment. To the degree possible, this should be based on a clear, concise explanation of their condition and of all proposed technical procedures related to recuperation, and probability of success. The patient should not be subjected to any procedure without their voluntary, competent, and understanding consent or that of their legally authorized representative.

Where medically significant alternatives for care or treatment exist, the patient will be informed.

The patient has the right to know who is responsible for authorizing and performing the procedures or treatment.

The patient shall be informed if the hospital proposes to engage in or perform human experimentation or other research/educational projects affecting their care or treatment, and the patient has the right to refuse to participate in any such activity.

Consultation

The patient, at their own request and expense, has the right to consult with a specialist.

Pain Care

The patient has a right to express pain and have that expression of pain accepted and respected as the most reliable indicator of pain. Pain will be assessed on a regular basis and managed according to current treatment methods. The patient should expect to receive prompt response to pain relief requests and to be informed and involved in all discussions regarding pain care.

Refusal of Treatment

The patient may refuse treatment to the extent permitted by law. The patient will be informed of the medical consequences of such a refusal. When refusal of treatment by the patient or their legally authorized representative prevents the provision of appropriate care in accordance with ethical and professional standards, the relationship with the patient may be terminated upon Version 9/2020

reasonable notice.

Transfer and Continuity of Care

A patient may not be transferred to another facility unless they, or their family member, have received a complete explanation of the need for the transfer and the alternatives to such a transfer, and unless the transfer is acceptable to the other facility.

Advance Directives

The patient has a right to have an advance directive concerning treatment (such as a living will or durable power of attorney for health care). The hospital and physician will honor the intent of that directive to the extent permitted by Nebraska law and hospital policies. The hospital will ascertain the existence of advance directives of a patient at the time of admission. The provision of care will not be conditioned on the existence of an advance directive. The advance directive or the intent of the directive will be placed in the patient's medical record.

Representative Decision Maker

The patient has the right to designate a representative decision maker in the event that they are incapable of understanding a proposed treatment or procedure or is unable to communicate their wishes regarding care. This decision maker can be named using an advance directive, medical power of attorney or similar document, and patients are encouraged to use such documents to name an individual they wish to make decisions on their behalf.

The patient also has the right to name a support person or personal advocate who supports the patient during the course of the visit or stay. The support person or personal advocate is allowed to exercise the patient's visitation rights. This person does not have to be the same person named as the representative named in the advance directive, medical power of attorney or similar document. The designated support person takes precedence over any non-designated individuals, regardless of relationship, and the designation continues throughout the inpatient stay or outpatient visit, unless expressly withdrawn, either orally or in writing, by the patient. The support person chosen will be included in patient communications regarding care to the extent possible. In the case of a patient who is incapacitated, an individual who presents the hospital with an advance directive, medical power of attorney or similar document executed by the patient and designating an individual to make medical decisions for the patient when incapacitated will take precedence over the support person.

Ethical Issues

The patient has the right to participation in the consideration of ethical issues that may arise in the provision of their care, including issues of conflict resolution, withholding resuscitative services, forgoing or withdrawal of life-sustaining treatment and participation in investigational studies or clinical trials.

Organ/Tissue Donation Procurement

The patient has the right to be informed, and make their wishes known, on organ/tissue donation and procurement.

Hospital Charges

Regardless of the source of payment for their care, the patient has the right to request and receive an itemized and detailed explanation of their total bill for services rendered in the hospital. The patient has the right to timely notice prior to termination of their eligibility for reimbursement by any third-party payer for the cost of their care.

Medicare beneficiaries have a right to receive the Advance Beneficiary Notice of Noncoverage (ABN) in situations where Medicare payment is expected to be denied.

Restraints, Abuse and Harassment

The patient has the right to be free from restraints and seclusion of any form that are not medically necessary or are used as a means of coercion, discipline, convenience or retaliation by the staff.

Patients have a right to be free from all forms of abuse or harassment.

Hospital Rules and Regulations

The patient should be informed of the hospital rules and regulations applicable to their conduct as a patient.

Complaints

Patients are entitled to information about the hospital's mechanism for the initiation, review and resolution of patient complaints. This includes information on filing a complaint with hospital staff/administration, the Nebraska Health and Human Services Regulation and Licensure and/or the DNV. Sleep Center Patients only may also file a complaint with the Accreditation Commission for Healthcare.

Community Hospital is committed to providing quality care as part of our mission. If you have a concern about the care or service you receive or you feel your rights may have been violated, the following options are available to you for resolving them:

- 1. You may voice your concern or complaint to the nurse that is taking care of you. Many times the nurse can correct a problem or address a concern you might have.
- 2. You may notify our Patient Feedback Hotline at 344-8222 to discuss your concerns.
- 3. You may file a complaint with the relevant state or accreditation authority:

Nebraska Health and Human Services Health Facility Investigations Licensure Unit - DHHS P.O. Box 94986 Lincoln, NE 68509

Hotline: 402-471-0316

DNV 400 Techne Center Dr Suite 100 Milford OH 45150 Attn: Complaints Hotline: 866-496-9647

Email: hospitalcomplaints@dnvgl.com

Quality Improvement Organization (QIO):

Livanta

Phone: 855-755-5580

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For Sleep Center Patients Only: Accreditation Commission for Health Care 139 Weston Oaks Ct.

Cary NC 27513

Phone: 855-937-2242 Local: 919-785-1214 Fax: 919-785-3011

Email: customerservice@achc.org

PATIENT RESPONSIBILITIES

- The patients and families are responsible for providing, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to the patient's health. They are responsible for reporting unexpected changes in the patient's condition to the responsible practitioner.
- The patient and family are responsible for asking questions when they do not understand what they have been told about the patient's care or what they are expected to do.
- The patient and family are responsible for following the treatment plan developed with the practitioner. The patient is responsible for cooperating with examinations, tests, nursing care and treatment, once he/she understands their purpose and has given consent. They should express any concerns they have about their ability to follow the proposed course of treatment; Community Hospital, in turn makes every effort to adapt the treatment plan to the patient's specific need and limitations. Where such adaptations are not recommended, the patient and family should understand the consequences of failing to follow the recommended course of treatment, or of using other treatments.
- If the patient or family refuses treatment or fails to follow the practitioner's instructions, they are responsible for the outcomes.
- The patient, family, and visitors are responsible for following the hospital's rules and regulations concerning patient care and conduct.
- Patients have a responsibility for assuring that the financial obligations associated with their care are met in a timely manner.
- Patients and family are responsible for using Community Hospital furnishings and equipment only as they were intended to be used.
- Patients are responsible for asking their physician or nurse what to expect regarding pain and pain management; discuss pain relief options with their physician or nurse; ask for pain relief when pain first begins; help the physician and nurse assess their pain; informing the physician and nurse when the pain is not relieved; and informing their physician and nurse about any concerns about taking pain medication.
- Patients, families, and visitors are expected to be considerate of other patients, and their privacy, and hospital personnel by not making unnecessary noise, smoking, or causing distractions. Patients, families, and visitors are responsible for respecting the property of other persons and that of the hospital.
- The patient is responsible to inform Community Hospital of the existence of and any changes made in Advance Directives.