

Southern Tennessee Regional Health System Patient Rights and Responsibilities

Patient Rights:

- The Patient has the right to name a patient representative and/or a support person and the patient representative is subject to all rights and responsibilities as the patient, in the event that the patient becomes incapacitated.
- The patient has the right to impartial access to treatment that is available or medically indicated, regardless of race, creed, sex, national origin, or source of
- . The patient has the right to have the hospital promptly notify a family member/representative and his/her physician of his/her admission to the hospital
- The patient has the right to considerate and respectful care and the right to give us feedback about his/her care.

 The patient has the right to have their care provided in a safe effective manner and in a safe environment that is free from abuse or harassment.
- The patient has the right to wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- The patient has the right to have a complete Advanced Directive (such as a Living Will or Durable Power of Attorney for Health Care) placed in his/her medical record with the expectation that the hospital staff and practitioners will honor the directive to the extent permitted by law and hospital policing. patient desiring Advanced Directives preparation shall be entitled to have hospital staff assist with the process.
- The patient has the right to be free from restraints of any form that are not medically necessary. For behavior management, all patients have the right to be free from restraints except in the case of an emergency, when there is an imminent risk of an individual physically harming themselves or others, and less
- restrictive interventions would be ineffective.

 The patient or patient representative has the right to obtain, from his/her physician, complete, current information concerning diagnosis, treatment, and outcomes of care, including unanticipated outcomes. This information should be provided in a language and format that 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 an appropriate person on his/her behalf.

 The patient has the right to know the identity and professional status of individuals providing service to him/her and to know which physician or other
- practitioner is primarily responsible for his/her care
- The patient or their representative has the right to participate in the development and implementation of his/her plan of care, including care planned for after discharge
- The patient or patient representative has the right to receive from his/her physician information necessary to give informed consent prior to the start of specific procedure and/or treatments. Except in emergencies, such information should include but not be limited to the specific procedure and/or treatment, the medically significant risks, benefits, alternatives, and the probable duration of the illness. The patient also has the right to know the name of the person responsible for the procedures and/or treatment. To the degree possible, this information should be based on a clear, concise explanation of his/her condition and of all proposed technical procedures including the possibility of any risk of mortality or serious side effects, problems relating to recuperation and probability of success. The patient should not be subjected to these procedure without his voluntary, competent, and understanding
- consent or the consent of his authorized representative.

 The patient at his/her own request and expense has the right to a second opinion or to consult with a medical specialist.

 The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his/her action. When refusal of treatment by the patient or his authorized representative prevents the provision of appropriate care in accordance with professional standards, the relationship with the patient may be terminated upon reasonable notice.
- The patient has the right to every consideration of his/her privacy concerning his/her own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in the care must have the permission of the patient to be present
- The patient has the right to confidentiality of his/her clinical records, except in such cases as suspected abuse or public health hazards and/or when reporting is permitted or required by law. The patient has the right to have his/her medical record read only by individuals directly involved in his/her treatment, payment for treatment, or in the monitoring of quality. Other individuals may only read his/her medical record on the patient's written authorization or that of his/her authorized representative. The patient has the right to expect all communications and other records pertaining to his/her care, including the source of payment for treatment, to be treated as confidential
- The patient has the right to access, request amendment to, and receive an accounting of disclosures regarding his or her own health information as permitted under applicable law.

 The patient has the right to access information contained in his/her clinical record within a reasonable time frame, and to have the information explained or
- interpreted as necessary, except when restricted by law.
 The patient has the right to expect that within its capacity, the Hospital must make reasonable response to the request of a patient for services. The hospital
- must provide evaluation, service, and/or referral as indicated by the urgency of the case.

 The patient has the right, when medially permissible, to be transferred to another facility. The patient may not be transferred to another facility or organization unless the need for the transfer, the benefits, risks, and the alternatives to such a transfer have been clearly explained to the patient. The patient will not be transferred until the other facility and a receiving physician agrees to accept him/her.
- The patient has the right to be informed by the practitioner responsible for his/her care or his/her delegate, of any continuing health care requirements following discharge from the hospital.
- The patient has the right to obtain information as to any relationship of Hillside Hospital to other health care and/or educational institutions in so far as his/her care is concerned; and has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating them.
- The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his/her care or treatment, or investigational studies and/or clinical trials and to refuse to participate in such research projects.
- The patient has the right to access people outside the hospital by means of visitors, support person(s), and a patient representative and may name this person(s) by verbal or written communication. These rights include the right to name a same sex partner as a support person or representative or both (See Advanced Directives policy for proper procedure when designating Patient Representative)
- When the patient does not speak or understand the dominant language of the community, he/she should have access to an interpreter
- The patient has the right to expect reasonable continuity of care when appropriate and to be informed of realistic care alternatives including protective services when hospital care is no longer appropriate. He/she has the right to expect that the hospital will provide a mechanism whereby he/she is kept informed by his/her physician or a delegate.
- The patient has the right to appropriate assessment and management of pain. The hospital plans, supports, and coordinates activities and resources to assure the patient's pain is recognized and addressed appropriately. This includes initial assessment and regular reassessment of pain; education of all relevant providers in patient assessment and management; education of the patient and/or family regarding pain treatments; and while taking into account the patient's personal, cultural, spiritual, and/or ethnic beliefs, communicating to the patient and/or family that pain management is an important part of
- The patient has the right to examine and receive an explanation of his/her bill regardless of source of payment, and receive an itemized and detailed
- explanation of his/her total bill for services rendered in the hospital.

 The patient also has the right to information regarding "Patient's Bill of Rights" policy upon request. Any questions or complaints concerning the quality of care will be addressed at the time identified or brought to the attention of the supervisor or director. Review and follow-up of complaints will be done in a timely fashion. The patient is entitled to information about the hospital's mechanism that can assist in the prompt resolution of complaints and answers to questions about his/her hospital stay and care. Patients may also bypass the internal complaints process and register a complaint with the Department of Health by calling 1–800–287–0010, or by writing to : Tennessee Department of Health, 425 Fifth Ave. North, Cordell Hull Bldg. 3rd floor, Nashville, TN 37247. Quality of Care concerns may also be reported to The Joint Commission by calling 1–800–994–6610 or by emailing
- complaints@jointcommission.org.

 The dying patient has the right to comfort and dignity through treatment of primary and secondary symptoms that respond to therapies as desired by the patient or surrogate decision-maker. Psychological and spiritual concerns of the patient and the family regarding dying shall be acknowledged along with his/her individual and corporate expression of grief.
- The patient has the right to access A Medical Ethics Committee in the event of questions or concerns regarding the patient's rights. The patient has the right to know what hospital rules and regulations apply to his/her conduct as a patient and shall be given information about rights and responsibilities upon admission.

Patient Responsibilities:

- The patient has the responsibility to provide information about present complaints, (including his/her level of pain based on the Hospital's tool for measurement), past illness, hospitalization, medication and other matters relating to his/her health
- The patient is responsible for following the treatment plan recommended by the practitioner primarily responsible for his/her care and for informing their physician and other caregivers if he/she anticipates problems in following the prescribed treatment.
- The patient is responsible for asking questions related to the plan for treatment and for acknowledging when he or she does not understand the treatment
- course or care decisions The patient is responsible for the consequences of his/her actions if he/she refuses treatment or does not follow the practitioner's instructions
- The patient is responsible for following hospital rules and regulations affecting patient care, conduct, and safety
- The patient is responsible for being considerate of other patients and hospital property and personnel, and for assisting in the control of noise, smoking, and number of visitors
- The patient is responsible for ensuring that the healthcare institution has a copy of his/her written Advanced Directives. The patient has a responsibility, when able, for maintaining personal hygiene and grooming during hospital stay.
- The patient has the responsibility for providing information for insurance and for working with the hospital to arrange payment when needed