



Origination 05/1988
Last Approved 02/2024
Effective 02/2024
Last Revised 02/2024
Next Review 02/2026

Owner Mary Lowrance:
Executive
Director Quality
Improvement

Area Administrative
Community and
Customer

Applicability Logan Health &
LHMC

Patient Rights & Responsibilities, A401

PURPOSE

To define the rights and responsibilities of each patient who enters a Logan Health facility for care.

POLICY

Patient Rights

1. The Administration, Medical Staff, and Employees of Logan Health respect the rights of the patient and will provide considerate, respectful care focused on the patient's individual needs.
2. The hospital affirms the patient's rights to make decisions regarding his/her medical care, including the decision to discontinue treatment, to the extent permitted by law. (Reference: *Withholding and Withdrawal of Life Sustaining Treatment, A713*)
3. The hospital also affirms the patient's rights to the hospital's reasonable response to his/her requests and need for treatment or service, within the hospital's capacity and its stated mission and applicable laws and regulations.
4. The hospital staff will assist the patient in the exercise of his/her rights and inform the patient or his/her legal representative of any responsibilities incumbent upon him/her in the exercise of those rights.
5. **Hospital Rules and Regulations:** The patient should be informed of the hospital rules and regulations applicable to his/her conduct as a patient.
6. **Access To Care:** Individuals will be accorded impartial access to treatment or accommodations that are available or medically indicated, regardless of race, creed, sex, national origin, or sources of payment for care.

7. **Respect and Dignity:** The patient has the right to competent, considerate and respectful care in a safe setting that fosters the patient's comfort and dignity and is free from all forms of abuse and harassment, including abuse or harassment based on gender, gender identity or gender expression. Patients will be allowed to express spiritual beliefs and cultural practices that do not harm others or interfere with their planned course of medical therapy. The care of the dying patient will optimize the patient's comfort and dignity through treatment of primary and secondary symptoms that respond to treatment (as desired by the patient or designated representative). The goal in the care of all patients is to effectively manage pain and to acknowledge the psychosocial, emotional, and spiritual needs of the patient and family regarding dying and their expression of grief.
8. **Privacy and Confidentiality:** The patient has the right, within the law, to personal informational privacy as manifested by the following rights:
- A. To refuse to talk to anyone not directly involved in his/her care.
 - B. To wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment, or the patient's safety.
 - C. To be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy. This includes the right to have a chaperone or the gender preferred by the patient 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 is asked to disrobe.
 - D. To expect that any discussion or consultation involving his/her care will be conducted discreetly, and that individuals not directly involved in his/her care will not be present without his/her permission.
 - E. To expect all communications and other records pertaining to his/her care, including the source of payment for treatment, to be treated as confidential within the limits prescribed by law.
 - F. To see or get a copy of his/her medical record, to request an amendment to his/her medical record, and to request a list of people to whom his/her personal health information may be or was disclosed.
 - G. To be placed in protective privacy when considered necessary for personal safety.
9. **Personal Safety:** The patient has the right to expect reasonable safety insofar as the hospital practices and environment are considered.
10. **Restraint and Seclusion:** The patient has the right to be free of restraint or seclusion that is not necessary for medical immobilization or for the safety of patients, staff, or visitors.
11. **Identity:** 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. This includes the patient's right to know of the existence of any professional relationship among individuals who are treating him/her, as well as the relationship to any other health care or educational institutions involved in his/her care. Participation by patients in clinical training programs or in the gathering of data for research purposes should be voluntary.

12. **Information:** The patient has the right to obtain from the practitioner responsible for coordinating his/her care, complete and current information concerning his/her diagnosis (to the degree known), treatment, and any prognosis. This information will be communicated in terms 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 a legally authorized representative acting on behalf of the patient.
13. **Communication:** The patient has the right of access to people outside the hospital by means of visitors and by verbal and written communication. When the patient does not speak or understand the predominant language of the community, he/she should have access to an interpreter whenever one is available. This is particularly true where language barriers are a continuing problem.
14. **Refusal of Treatment:** The patient may refuse treatment to the extent permitted by law. When refusal of treatment by the patient or his/her legally authorized representative prevents the provision of appropriate care in accordance with professional standards, the relationship with the patient may be terminated by the healthcare practitioner upon reasonable notice.
15. **Consent and Participation in Care Plan:** The patient has the right to reasonable informed participation in decisions involving his/her health care:
 - A. To the degree possible, this should be based on a clear, concise explanation of his/her condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success. The patient should not be subjected to any procedure without his/her voluntary, competent, and understanding consent or the consent of his/her legally authorized representative. Where medically significant alternatives for care or treatment exist, the patient will be so informed.
 - B. The patient has the right to formulate advance directives and to appoint a Durable Power of Attorney to make health care decisions on his/her behalf to the extent permitted by law. (Reference: *Withholding or Withdrawal of Life Sustaining Treatment*, A713)
 - C. The patient has the right to know who is responsible for authorizing and performing the procedures or treatment.
 - D. The patient's legal guardian, next of kin, or legally appointed representative, has the right to exercise, to the extent permitted by law, the rights delineated on behalf of the patient if the patient is found by his/her physician to be medically incapable of understanding the purpose of treatment or procedures, is unable to communicate his/her wishes, or is an unemancipated minor.
 - E. The patient will be informed if the hospital proposes to engage in or perform human research/educational projects affecting his/her care or treatment, and the patient has the right to consent to or to refuse to participate in any such activity.
16. **Consultation:** The patient, at his/her own request and expense, has the right to consult with a specialist.
17. **Transfer and Continuity of Care:** A patient may not be transferred to another facility or organization unless he has received a complete explanation of the need for the transfer and of the alternative to such transfer unless the transfer is acceptable to the other facility or

organization. The patient or his/her representative has the right to be informed by the practitioner responsible for his/her care of any continuing health care requirements following discharge from the hospital.

18. **Hospital Charges:** Regardless of the source of payment for his/her care, the patient has the right to request and receive an itemized and detailed explanation of his/her total bill for services rendered in the hospital. The patient has the right to timely notice prior to termination of his /her eligibility for reimbursement by any third party payer for the cost of his/her care.
19. **Registering of Complaint:** Patients are entitled to information about the hospital's mechanism for the initiation, review, and resolution of patient complaints or grievances. The patient has the right to register a complaint or grievance, and is assured that the presentation of such a complaint or grievance will not in itself serve to compromise future access to care. The patient has the right to information on how to contact regulatory agencies directly, and may contact an agency without participating in the hospital's complaint process. (See *Customer Complaint/ Grievance, A402*)
20. **Participation In Consideration of Ethical Issues:** The patient or his/her representative has a right to be included in discussions of ethical issues surrounding his/her care. The health care professional has an obligation to consider the voice of the patient and/or designated patient representative(s) when ethical issues arise during the patient's care. The patient and/or patient representative(s) have the right to be informed of, and consent to, any investigational studies or clinical trials that are related to the patient's course of treatment while hospitalized. The patient and/or patient representative(s) have the right to request assistance in ethical decision-making from the Medical Staff Ethics Committee. (See *Ethics Committee, A404*)
21. **Employee Education:** The hospital has the responsibility of assuring that its staff understands and adheres to a patient's rights. Employees will receive educational inservices during their initial employee orientation. Annual education of the staff will be conducted to assure up-to-date understanding of patient rights and the roles of employees in protecting those rights.
22. **Protective Services:** All patients have the right to seek help through protective services. Current phone listings for Adult Protective Services and Child Protective Services will be provided at the time of registration. Social Services is available 24 hours a day, 7 days a week to assist patients or their representatives with this need.

Patient Responsibilities

1. The patient has the responsibility to provide, to the best of his/her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his/her health. He/she has the responsibility to report unexpected changes in his/her condition to the responsible practitioner. A patient is responsible for making it known whether he/she clearly comprehends a contemplated course of action and what is expected of him/her.
2. The patient is responsible for informing the practitioner in writing of any Advance Directives which the patient has made or wishes to make.
3. The patient is responsible for following the treatment plan recommended by the practitioner responsible for his/her care or for informing the practitioner of his/her refusal.
4. The patient is responsible for his/her actions if he/she refuses treatment or does not follow

- the practitioner's instructions.
5. The patient is responsible for assuring that the financial obligations of his/her health care are fulfilled as promptly as possible.
 6. The patient is responsible for following hospital rules and regulations affecting patient care and conduct.
 7. The patient is responsible for being considerate of the rights of other patients and hospital personnel, and for assisting in the control of noise, smoking, and the number of visitors. The patient is responsible for being respectful of the property of other persons and of the hospital.

PROCEDURE

The department of Quality Management Services posts information on Patient Rights and Responsibilities in public areas. Upon registration or upon request, patients receive an information packet that includes a condensed notification of Patient Rights & Responsibilities. The packet also contains, but is not limited to, information on Advance Directives, questionnaire regarding religious preference, Medicare Rights, Medicaid Acknowledgement, and patient liability notification. Patients are also offered the notice of privacy practices.

REFERENCES

Withholding or Withdrawal of Life-Sustaining Treatment, A713
Advance Directives, A703
Do Not Resuscitate "(DNR)", A702
Patient Complaint/Grievance Policy, A402
Ethics Committee, A404
HCFA Patient Rights
CMS Conditions of Participation

Approval Signatures

| Step Description | Approver | Date |
|------------------|--|---------|
| Admin Approval | Kevin Abel: President - LHMC & Whitefish | 02/2024 |
| Policy Committee | Kelly Stimpson: Associate General Counsel | 02/2024 |
| Reviewer | Robyn Whalen: System Director of Compliance Regulatory | 01/2024 |
| Owner | Mary Lowrance: Executive Director Quality Improvement | 05/2023 |

Applicability

Logan Health (locations excluding LHMC), Logan Health Medical Center

COPY