

PATIENT RIGHTS AND RESPONSIBILITIES

PURPOSE

To outline the basic rights and responsibilities of patients and families when treated at Stillwater Medical Center. The Patient Self Determination Act (PSDA) was designed to encourage patients to consider treatment options and document their preferences before they are no longer capable of participating in the treatment process; and this act also states Health care facilities are required to inform patients of their right to control decisions regarding their medical care. This policy includes all the basic rights as outlined in the PSDA and by Centers for Medicare/Medicaid Services (CMS), AHA, and the hospital's accrediting body.

SCOPE: All patients.

DEFINITION

Patient: When the term patient is used, that term also includes parents/guardians, health care proxy/durable power of attorney for healthcare, representative/support person, and other family members appropriate to make care decisions.

PROCEDURE

Each patient receives the following information on each visit. Patient Handbooks are also located throughout the hospital listing these Rights.

YOUR RIGHTS AS A PATIENT

The mission of Stillwater Medical Center is to provide compassionate and quality healthcare services in a financially sound manner. We are committed to maintaining your basic rights as our patient.

YOU HAVE THE RIGHT TO

- A. Reasonable access to care within Stillwater Medical Center's capacity, its stated philosophy, and applicable laws and regulations;
- B. Be treated with consideration, respect, and dignity in a safe and secure environment that is free from unnecessary restraint, free from all forms of abuse or harassment, free from discrimination based on race, color, national origin, sex, sexual orientation, gender identity, age, disability or source of payment, and have access to protective services if deemed necessary; this includes consideration and respect for personal values and beliefs;
- C. Personal and physical privacy consistent with care needs;
- D. Receive appropriate assessment and management of pain;
- E. Be apprised of the hospital grievance/complaint process; (see statement at end of Patient Rights and Responsibilities)
- F. Be informed of your health status, be involved in care planning and treatment, make informed decisions and give informed consent regarding care, be able to request or refuse treatment as allowed by state law; be involved in resolving dilemmas about care decisions; know the identity of your caregivers;
- G. Confidentiality of your medical information and medical records;
- H. Access information from your medical records within a reasonable time frame;
- I. Examine and receive an explanation of your bill regardless of source of payment;
- J. Be informed of potential research and experimental projects that are associated with your care; to participate or refuse without compromise to your care;

- K. Pastoral care and other spiritual or cultural considerations, if requested;
- L. Unrestricted access to communication; to participate in any decisions regarding restriction of access to communication when necessary for patient care;
- M. Be informed of expected outcomes of care; when appropriate you or your family will be informed of negative or unexpected outcomes;
- N. Expect the hospital to operate according to a code of ethical behavior and to have any appropriate patient issues addressed according to this code;
- O. Comfort and dignity during the final stages of life;
- P. Have a family member or representative of your choice and your own physician notified promptly of your admission to the hospital.
- Q. SMC is affiliated with several professional schools and universities. Therefore, unless you indicate otherwise, students and observers may be involved in various aspects of your care. As a patient, you have the right to request that students and observers not be assigned to your care.
- R. Designate persons who are permitted to visit you during your hospital stay. The facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. A visitor may be restricted if the facility reasonably determines that the presence of that particular visitor would endanger the health or safety of a patient, a member of the staff, or other visitor, or would significantly disrupt the operations of the facility.

AS A PATIENT, YOU HAVE THE RESPONSIBILITY TO:

- A. Respect the policies of the hospital;
- B. Respect other patients and all personnel involved with your care;
- C. Abide by and respect the hospital's smoke free environment;
- D. Assist in the control of noise and the number of visitors;
- E. Be open and honest concerning any present illness, past hospitalizations, and any other matters relating to your health;
- F. Report whether you clearly understand the instructions given or if you will not be able to comply with these instructions;
- G. Assure that financial obligations of your healthcare are fulfilled promptly;
- H. Participate in the treatment plan recommended to you by your healthcare professionals, and accept responsibility for your actions if you refuse treatment or do not follow the instructions;
- I. Leave your valuables at home or place them in the hospital safe; you will have easy access to any valuables placed in the safe;
- J. Report any perceived or identified safety issues related to your care or the physical environment to your physician(s) or other health providers;
- K. Report perceived risks in your care and unexpected changes in your condition to your physician(s) and other health care providers;
- L. Provide an Advance Directive to the hospital prior to or during hospitalization;

If you have any complaints, concerns, or unmet needs, please feel free to discuss them with your nurse, physician, patient representative at 405-742-5676, or the Oklahoma State Department of Health at 1-405-271-6576. This will in no way compromise your current or future care. All information will be kept confidential

There are several other policies dealing with patient rights found throughout hospital policy manuals and the Medical Staff Manual.

ADVANCE DIRECTIVE NOTICE

You have the right to receive information and assistance in formulating an Advanced Directive and/or a Do-Not-Resuscitate consent. SMC will comply with these directives to the extent provided by state law.

VISITATION NOTICE

GENERAL GUIDELINES

- ✓ Visitors must be free of infection
- ✓ Children under 12 years of age are discouraged in the medical, surgical or intensive care units. They should be accompanied by an adult at all times.

MATERNAL CHILD HEALTH UNIT:

- ✓ Children under 12 years of age without sign or symptom of illness may visit. Children suspected to be ill should remain at home but if at the hospital must stay in the MCHU lobby and not have contact with newborns.
- ✓ Visitors may not gather and wait in the hallway as this is a fire code violation. They will need to stay in the MCHU lobby when not in the patient's room.
- ✓ ALL visitors must wash their hands before touching the baby.
- ✓ No visitor with known sickness (for example, cough, fever, open wounds) will be allowed to visit or handle the baby.
- ✓ Special Care Nursery visitors are limited to the mother and the support person designated by the mother to receive the second security band.

EMERGENCY DEPARTMENT:

- ✓ Except under extraordinary circumstances an ED patient may have visitors, usually limited to one or two at a time. Others may wait in the ED lobby or Family Conference Room.
- ✓ Both parents of children may accompany their child if desired.

REHAB UNIT;

- ✓ Visitors are requested to observe the following hours as this allows patients to participate in therapy and rest in between sessions in order to be able to perform at their highest level
 - Monday–Friday: 4:30pm–9:00pm
 - Saturday: 12 noon–9:00pm
 - Sunday: 9:00am–9:00pm

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- ✓ Due to space limitations, visitors are usually limited to one at a time in the pre-operative and recovery areas. Both parents of children are allowed. Other visitors may wait in the lobby

BIOGRAPHY SECTION

Approval: Ethics Committee 2/28/01; Compliance Committee 6/6/12; MEC 3/14/01, 11/9/05, 5/12/10, 4/16/12, 6/13/12, 3/8/17; BOT 11/22/05, 1/13/10, 4/24/12, 6/26/12, 3/28/17;
Source: CMS Conditions of Participation, AHA guidelines, Patient Self Determination Act
Effective:
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