

Patient Rights and Responsibilities

This Policy is Applicable to the following sites:

Big Rapids, Continuing Care, Gerber, Ludington, Outpatient/Physician Practices, Pennock, Reed City, SH GR Hospitals, SHMG, United/Kelsey, Zeeland

Applicability Limited to:	N/A
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Department Area:	Administrative

1. Purpose

Spectrum Health is dedicated to providing superior quality personal care to all patients. Along with clinical expertise, we want to provide an exceptional patient and family experience. We encourage our patients to be full participants in their health. An understanding of the rights and responsibilities will greatly enhance the partnership between the patient, family, and the rest of the health care team. Although a policy cannot guarantee the respectful consideration of a patient's rights, this policy statement shall serve as a guideline for Spectrum Health care providers to pattern their behavior and all activities in a daily effort to recognize a patient's rights. Its provisions should be considered in conjunction with those delineated in detail in the current Spectrum Health "Notice of Privacy Practices" which is posted throughout our facilities.

When appropriate, these rights will be extended to the patient's guardian, next of kin or legally authorized representative. A copy of the Patient Rights and Responsibilities brochure specific to that facility is included in the materials that are provided on admission. Additionally, Patient Rights information is posted throughout the organization and is available through the Spectrum Health external web site.

2. Definitions

Sex – "on the basis of sex includes, but is not limited to, discrimination on the basis of pregnancy, false pregnancy, termination of pregnancy, or recovery therefrom, childbirth or related medical conditions, sex stereotyping, and gender identity." (45 CFR 92.4.)

Gender identity – "an individual's internal sense of gender, which may be male, female, neither, or a combination of male and female, and which may be different from an individual's sex assigned at birth. The way an individual expresses gender identity is frequently called "gender expression," and may or may not conform to social stereotypes associated with a particular gender. A transgender individual is an individual whose gender identity is different from the sex assigned to that person at birth." (45 CFR 92.4.)

Sex Stereotypes – "stereotypical notions of masculinity or femininity, including expectations of how individuals represent or communicate their gender to others, such as behavior, clothing, hairstyles, activities, voice, mannerisms, or body characteristics. These stereotypes can include the expectation that individuals will consistently identify with only one gender and that they will act in conformity with the gender-related expressions stereotypically associated with that gender. Sex stereotypes also include gendered expectations related to the appropriate roles of a certain sex." (45 CFR 92.4.)

3. Responsibilities

Staff will be knowledgeable of these rights and responsibilities and support and encourage patients to become familiar with the following:

4. Policy

I. Patients Have the Right to Caring, Respectful, Personal, Quality Care

A. Patients can expect:

1. That health care providers at Spectrum Health will welcome, respect and serve all people regardless of ethnicity, color, gender, national origin, religion, disability, age, HIV status, sex, sexual orientation, race, or source of payment for services or any other basis prohibited by federal, state or local law. Patients will be treated in a manner consistent with their gender identity.
2. Their care to be provided in a professional and respectful manner at all times.
3. Sign and spoken language services, free of charge, if the patient has limited English proficiency or is hearing impaired.
4. Treatment, services and referral as needed. If we cannot meet the patient's medical needs, we will arrange a transfer to another facility. Referrals will be made only after the patient is given full information about why the transfer is needed and offered other choices for treatment if they choose not to be transferred. The facility receiving the patient must agree to accept the transfer.
5. Every effort will be made to provide pastoral/spiritual care as desired from the patient's pastor, priest, rabbi or other religious leader or from Spectrum Health's pastoral care services, if available.
6. To be told how to file complaints and settle disputes, arguments or conflicts. Resources include services such as Patient Relations, Ethics Committee and other regulatory agencies as required by law.
7. To be able to use protective and advocacy services as needed.
8. To have a family member or a representative of their choice and their physician notified promptly of their admission.
9. Equal access to communications and electronic and information technology for individuals with disabilities.

II. Patients Have the Right to Receive Information about Their Treatment and Health Care Team

A. The patient can expect the health team to provide:

1. Clear explanations about diagnosis and treatment.
2. Information about specific treatments or procedures, including their benefits and risks, and the medically reasonable options to these treatments.
3. The name and professional title of the physician in charge of the patient's care and the names and titles of other health care providers.
4. Results of treatments, including unexpected results, from their physician or their designee.
5. Access to their medical record. It is encouraged that the patient will review their record with their physician or designee. The patient also has the right to ask for and receive a copy of his or her own medical record for a fair fee.
6. The patient's chart or other personal health information to third parties only when approved by the patient (except as required or allowed by law for treatment, payment or health care operations).

III. Patients Have the Right to Make Decisions about Their Own Care

A. The patient or their legally designated representative can expect:

1. To participate and make decisions about their own health care and care planning.
2. To be encouraged to take an active involvement in their care as a patient safety strategy.
3. To have the choice to accept or refuse medical care and treatment to the extent allowed by law and to be told of the medical results of these decisions.

4. The opportunity to complete an Advance Directive and know that it will be followed to the extent allowed by law. If asked, the hospital and care team can help the patient prepare the Advance Directive.
5. To have the right to a second opinion with another physician, at their own request and expense.
6. To seek the advice or opinion of the Ethics Committee.
7. To make decisions to include or exclude any or all family members or significant others in the involvement of their care.
8. To get information about end of life care.
9. An explanation of their bill, financial assistance and payment options. Patients also have a right to receive a copy of their bill, regardless of payer.

IV. Patients Have the Right to be Comfortable and Safe

A. They can expect:

1. To have care provided in a safe, secure and efficient environment, free from abuse and harassment. Chemical or physical restraints will only be used in emergencies to protect the patient and/or others.
2. To have ongoing assessment of their pain and be involved in plans to manage pain. The patient can expect:
 - To have information about pain and pain relief options in accordance with national recommendations and best practice of the treatment of pain.
 - A concerned staff dedicated to preventing pain.
 - Health professionals who respond quickly to reports of pain.
3. To receive care in a setting that maintains the patient's dignity through personal space and clothing suited to their condition.
4. To be told of the experimental nature of suggested procedures or treatments and have the right to refuse those treatments without affecting their care.
5. A validation of their name and date of birth through a visual inspection (ID band or other documents) and verbal acknowledgement before any medical treatment or intervention is provided to the patient.
6. To receive information about how to report concerns, including concerns about safety and to be encouraged to do so without retaliation.

V. Patients Have the Right to Have Privacy and Confidentiality

A. They can expect:

1. To have personal privacy, including privacy of personal medical information.
2. To have the right to refuse to talk with or see anyone not officially connected with the hospital. This includes visitors or others not directly involved in providing care.
3. To have the use of a telephone for private conversations.
4. To be interviewed and examined in a setting that provides reasonable privacy in sight and sound.
5. To have another person present during exams or procedures, if requested.
6. To remain disrobed only as long as is needed for medical purposes.
7. To be asked for written consent for any filming or recording to be used for any purpose other than identification, diagnosis and treatment.

VI. Rights of Persons Served by all Commission on Accreditation of Rehabilitation Facilities (CARF)-accredited units

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

A. The rights of the person served are communicated to the person served:

1. In a way that is understandable.
2. Prior to the beginning of service delivery or at initiation of service delivery.
3. Annually for person served in a program longer than one year.

4. Available at all times for review and clarification.
- B. The organization implements policies promoting the following rights of the persons served:
1. Confidentiality of information.
 2. Privacy.
 3. Freedom from abuse, financial or other exploitation, retaliation, humiliation, and neglect;
 4. Access to information pertinent to the person served in sufficient time to facilitate his or her decision making, and their own records.
 5. Informed consent or refusal or expression of choice regarding: service delivery, release of information, concurrent services, composition of the service delivery team, and involvement in research projects, if applicable.
 6. Access or referral to: legal entities for appropriate representation, self-help support services, and advocacy support services.
 7. Adherence to research guidelines and ethics when persons served are involved, if applicable.
 8. Investigation and resolution of alleged infringement of rights.
 9. Process by which persons served may formally complain to the organization.
 10. Other legal rights.

VII. Rights of Persons Served by all Community Health Accreditation Partner (CHAP)-accredited agencies

The patient and/or representative are informed of their rights both verbally and in writing prior to the initiation of care. Acknowledgement of receipt of the patient bill of rights is signed by the patient or legal representative and made a permanent part of his or her record.

All CHAP accredited agencies:

Have a written Patient Bill of Rights that defines patient rights and responsibilities. Patients can exercise all rights identified including items I through VIII above and all CHAP accredited agencies will protect and promote the patient's exercise of rights including the right to:

- A. Be informed of his or her rights;
- B. Exercise rights at any time;
- C. Have his or her property and person treated with respect;
- D. Be free from neglect, verbal, mental, sexual and physical abuse, including injuries of unknown source, and/or misappropriation of patient property by anyone furnishing services on behalf of the organization.
- E. Voice and report grievances or complaints regarding:
 - treatment or care that is (or failed to be) delivered,
 - the lack of respect for property and/or person, or
 - the violation of any rights to the organization, CHAP, and state or local agencies.
- F. Patients are provided the contact information for lodging complaint or asking questions (including contact information and hours of operation) for:
 - the state toll-free hotline, including the purpose of the hotline which is to receive complaints or questions about local organizations.
 - the CHAP hotline to ask questions, report grievances or voice complaints.
- G. Legal Capacity:
 - If a patient has been adjudged to lack legal capacity to make health care decisions as established by state law by a court of proper jurisdiction, the rights of the patient may be exercised by the person appointed by the state court to act on the patient's behalf.
 - If a state court has not adjudged a patient to lack legal capacity to make health care decisions as defined by state law, the patient's representative may exercise the patient's rights.
 - If a patient has been adjudged to lack legal capacity to make health care decisions under state law by a court of proper jurisdiction, the patient may exercise his or her rights to the extent allowed by court order.

- H. Have a confidential record and access to or release of patient information and records in accordance with Health Portability and Accountability Act (HIPAA) law and regulation (45 CFR parts 160 and 164).
- I. The agency maintains documentation of compliance of distribution of required information to the patient.
- J. Patient rights and responsibilities are located in the agency Patient Handbook which is reviewed at time of admission and as needed.

For CHAP Home Health Care accredited agencies patients have the right to:

- A. Participate in, be informed about, and consent to or refuse care in advance of and during treatment, where appropriate, with respect to:
 - Completion of all assessments;
 - The care to be furnished, based on the comprehensive assessment;
 - Establishing and revising the plan of care;
 - The disciplines that furnish the care;
 - The frequency of visits;
 - Expected outcomes of care, including patient-identified goals and anticipated risks and benefits;
 - Any factors that could affect treatment effectiveness;
 - Any changes in the care to be furnished.
- B. Receive all services in the plan of care.
- C. Be advised of the extent to which payment for services may be expected from Medicare, Medicaid, or any other federally funded aid program known to the organization.
- D. Be advised of charges that may not be covered by Medicare, Medicaid, or any other federally funded aid program known to the organization.
- E. Be advised of the charges the individual may have to pay before care is initiated.
- F. Be advised of any changes in the information provided with respect to payment and charges, if they occur. The patient and representative, if any, are advised of these changes as soon as possible, in advance of the next home visit, and in accordance with the patient notice requirements at 42 CFR 411.408 (d)(2) and 42 411.408(f).
- G. Receives proper written notice, in advance of a specific service being furnished, if the organization believes that the service may be non-covered care or in advanced of the organization reducing or terminating ongoing care.
- H. Be advised of the names, addresses, and phone numbers of federally funded and state funded entities that serve the area where the patient resides, including the:
 - Area Agency on Aging
 - Center for Independent Living
 - Protection and Advocacy Agency
 - Aging and Disability Resource Center
 - Quality Improvement Organization
- I. Voice and report grievances or complaints regarding treatment of care that are (or fail to be) delivered, the lack of respect for property and/or person, or the violation of any rights to the organization, CHAP, and state or local agencies.
- J. Be free from any discrimination or reprisal for exercising his or her rights or voicing grievances to the organization or an outside entity.
- K. During the initial evaluation and prior to furnishing care, the organization provides the patient and the patient's legal representative, if any, the contact information for the Administrator, for the purpose of receiving complaints. Contact information includes:
 - Administrator's name
 - Business address
 - Business phone number
- L. Be informed of the right to access and how to access auxiliary aids and language services.
- M. To be informed of the patient's rights in language and manner the individual understands including:

- Providing verbal notice of the patient rights and responsibilities in the individual's primary or preferred language in a manner the individual understands.
 - Free of charge;
 - With the use of a competent interpreter, if necessary;
 - No later than the completion of the second visit from a skilled clinician.
- N. Provides the patient and the patient's legal representative, if any, written notice of the patient's rights and responsibilities, the agency's transfer and discharge policies, and an Outcome and Assessment Information Assessment (OASIS) privacy notice to all patients for whom OASIS data are collected. Written notice is provided during the initial evaluation visit, in advance of furnishing care to the patient, and is understandable to persons who have limited English proficiency and accessible to individuals with disabilities. Written notice of rights and responsibilities, transfer and discharge policies are provided to a patient's elected representative, if any, within four business days of the initial evaluation visit.

For CHAP Hospice accredited agencies patients have the right to:

- A. Receive effective pain management and symptom control from the hospice for conditions relating to the terminal illness
- B. Be involved in developing his or her hospice plan of care
- C. Choose his or her attending physician
- D. Refuse care or treatment
- E. Receive information about the services covered under the hospice benefit
- F. Receive information about the scope of services that the hospice will provide and specific limitations on those services
- G. Be advised that Hospice complies with Subpart 1 of 42 CFR 489 and receive a copy of the organization's written policies and procedures regarding advance directives; including a description of an individual's right under applicable state laws and how such rights are implemented by the organization.
- H. Receive written information describing the organization's grievance procedure which includes the contact information, contact phone number, hours of operation, and mechanisms for communicating problems
- I. Receive information addressing any beneficial relationship between the organization and referring entities.

VIII. Patient Responsibilities

- A. The patient is responsible to:
- 1. Provide a complete, accurate and honest medical history and information including:
 - Nature of your illness.
 - Past illnesses and hospitalizations.
 - Specific problems, symptoms, pain or concerns.
 - Medication (prescription, over the counter and herbal) history, (including dose and frequency), reactions to medications (foods and latex) and concerns.
 - Changes in your medical condition, as they happen.
 - 2. Speak up and ask questions if you do not understand the treatment plan and your role in the plan.
 - 3. Make informed decisions about your care.
 - 4. Follow the recommendations, advice and treatment course arranged between you and your health care team.
 - 5. Follow Spectrum Health's rules about patient care and conduct to support quality care and a safe environment, such as:
 - Respecting the rights of other patients and Spectrum Health staff and property.
 - Following our tobacco-free environment policy.
 - Knowing the name of the physician in charge of your care.
 - 6. Provide complete, accurate and timely information about the sources of payment for the care provided and fulfill financial obligations in a timely manner. Emergency care will not be delayed while we gather this information.

7. Accept and recognize responsibility for the medical results if you refuse treatment or do not follow the health care provider's instructions.

IX. Concerns and Complaints

If a patient has a concern or complaint about patient safety or quality of care at Spectrum Health, we value hearing from them and encourage them to contact the Patient Relations Department. We will work with the patient and family to address and resolve their concerns. They also have the right to file a complaint at any time with The State of Michigan, The Joint Commission, Community Health Accreditation Partner, or the Office of Civil Rights.

Spectrum Health Patient Relations

616.391.2624; toll free: 1.855.613.2262

patient.relations@spectrumhealth.org

To contact the office of civil rights:

Michigan Department of Civil Rights

350 Ottawa Ave NE

Grand Rapids, MI 49503

1.800.482.3604

To contact the state licensing agency:

Licensing and Regulatory Affairs

Bureau of Community and Health Systems

Health Facilities Division

P.O. Box 30664,

Lansing, MI 48909

State of Michigan Complaint Hotline:

1.800.882.6006

To contact the organization that accredits the Rural Health Clinic (RHC) Physician Practices

*See Appendix A for the appropriate agency - either State of Michigan (above) or:

The Compliance Team, Inc.

www.thecomplianceteam.org

Phone: 1-800-291-5353

To contact the organization that accredits the hospital (excluding Ludington hospital):

Office of Quality and Patient Safety

The Joint Commission

One Renaissance Boulevard

Oakbrook Terrace, IL 60181

On the web: www.jointcommission.org

(Use the "Report a Patient Safety Event" link in the "Action Center" on the home page of the website)

By fax: 630-792-5636

X. Allegations of Discrimination

Any person who believes someone has been subjected to discrimination on the basis of race, color, national origin, sex, age or disability may file a grievance with the Section 1557 Coordinator:

Director, Patient Relations

100 Michigan St NE, MC 006

Grand Rapids, MI 49503

616.391.2624; toll free: 1.855.613.2262

4. Resources

Patient Rights and Responsibilities brochure – X17460

Patient Rights and Responsibilities brochure (Ludington) - X18943

5. Revisions

Spectrum Health reserves the right to alter, amend, modify or eliminate this policy at any time without prior written notice.

6. Policy Development and Approval

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7. Keywords

rights, nondiscrimination, discrimination, gender, race, patient, responsibility, sex

Appendix A - Rural Health Clinic (RHC) Survey Process

Reed City Hospital RHC's Tax ID 38-2770076	Address	phone	Survey Process State Vs Deeming Agency
Spectrum Health Reed City Hospital Multi-Specialty Clinic-Reed City	300 N Patterson Rd Reed City MI 49677	231-832-7170	State
Spectrum Health Reed City Hospital Ewart Family Practice	5991 S 95th ave Ewart MI 49631	231-832-8700	State
Spectrum Health Reed City Hospital Tustin Family Practice	111 Church St Tustin MI 49688	231-832-8560	State
Big Rapids Hospital RHC's Tax ID 38-1368744			
Spectrum Health Big Rapids Hospital Family Medicine	650 Linden St Suite 1 Big Rapids MI 49307	231-796-3200	State
Spectrum Health Big Rapids Hospital Family Medicine Canadian Lakes	8354 100th ave Suite 1 Stanwood MI 49346	231-796-6000	The Compliance Team
Spectrum Health Big Rapids Hospital Obstetrics and Gynecology	722 Locust St Big Rapids MI 49307	231-592-4200	The Compliance Team
United Hospital RHC's tax ID 38-1358412			
Spectrum Health United Hospital Belding Family Medicine	1227 State St Belding MI 48809	616-794-0940	The Compliance Team
Spectrum Health United Hospital Lakeview Family Medicine	418 Washington St Lakeview MI 48850	989-352-6474	The Compliance Team
Spectrum Health United Hospital Family Medicine and Obstetrics & Gynecolog	1202 W Oak St Greenville MI 48838	616-754-4686	State
Spectrum Health United Hospital Internal Medicine and Pediatrics - Greenville	707 S Greenville West Dr Greenville MI 48838	616-754-3001	The Compliance Team
Gerber Hospital RHC's tax ID 38-1359517			
Spectrum Health Gerber Memorial Family Medicine - Grant	230 S Maple St Grant MI 49327	231-834-5995	State
Spectrum Health Gerber Memorial Family Medicine - Hesperia	78 N Division Hesperia MI 49421	231-854-7235	State
Spectrum Health Gerber Memorial Family Medicine - Fremont	204 W Main St Fremont MI 49412	231-924-1800	State
Spectrum Health Gerber Memorial Obstetrics and Gynecology	212 S Sullivan Fremont MI 49412	231-924-1212	State
Spectrum Health Gerber Memorial Family Medicine Newaygo	211 W Pine Lake Dr Newaygo MI 49337	231-652-1631	The Compliance Team
Spectrum Health Gerber Memorial Multispecialty Clinic Fremont	230 W Oak St Fremont MI 49412	231-942-4200	The Compliance Team
Ludington Hospital RHC's Tax ID 38-1359266			
Spectrum Health Ludington Hospital Family and Internal Medicine-Ludington	922 Lawndale St Ludington MI 49431	231-845-7380	The Compliance Team
Spectrum Health Ludington Hospital Family Medicine - Pentwater	500 N Hancock St Pentwater MI 49449	231-869-7051	The Compliance Team
Spectrum Health Ludington Hospital Family Medicine - Hart	2481 N 72nd ave Hart MI 49420	231-873-2163	The Compliance Team
Spectrum Health Ludington Hospital Family Medicine - Ludington	7 N Atkinson Dr Suite 113 Ludington MI 49431	231-843-3700	The Compliance Team
Spectrum Health Ludington Hospital Internal Medicine - Ludington	7 N Atkinson Dr Suite 111 Ludington MI 49431	231-843-3600	The Compliance Team
Spectrum Health Ludington Hospital Pediatrics - Ludington	907 E Tinkham Ave Ludington MI 49431	231-843-3477	The Compliance Team
Spectrum Health Ludington Hospital Obstetrics & Gynecology	250 N Nelson Rd, Ludington MI 49431	231-843-6767	The Compliance Team
Pennock Hospital RHC's tax ID 38-1360562			
Spectrum Health Pennock Family Medicine - Lake Odessa	4294 Laurel Dr Lake Odessa MI 48849	616-374-7660	The Compliance Team
Spectrum Health Pennock Family Medicine - Ionia	2776 South State RD , Ionia MI 48846	616-775-7500	The Compliance Team
Spectrum Health Pennock Family Medicine - Gun Lake	12851 West M-179 Highway W'ayland MI 49348	877-377-7322	The Compliance Team
Spectrum Health Pennock Family, Internal & Pediatric Medicine - Hastings	1108 W State St #3 Hastings MI 49058	269-945-0922	The Compliance Team
Spectrum Health Pennock Obstetrics & Gynecology - Hastings	1005 W Green St Suite 301 Hastings MI 49058	269-945-8080	The Compliance Team
Spectrum Health Pennock Family Medicine - Middleville	490 Edward St Middleville MI 49333	269-795-4434	The Compliance Team
** State of Michigan survey completed			
*** The Compliance Team - deeming agency hired to complete RHC Accreditation			