

- Patients have the right to be free from mental, physical, sexual, and verbal abuse, neglect, and exploitation:
 - The hospital will, to the best of its ability, protect patients from real or perceived abuse, neglect, or exploitation from anyone, including staff, students, volunteers, other patients, visitors, or family members;
 - All allegations, observations, or suspected cases of abuse, neglect, or exploitation that occur in the hospital are explored by the hospital and, based on the type of event, are referred to the appropriate authorities for investigation.
- Patients have the right to pain management. The hospital plans, supports, and coordinates activities and resources to ensure that pain is recognized and addressed appropriately and in accordance with the care, treatment and services provided including:
 - Assessing pain;
 - Educating all relevant providers about assessing and managing pain;
 - Educating patient and families, when appropriate, about their roles in managing pain and the potential limitations and side effects of pain treatments.
- Patients have a right to access protective and advocacy services:
 - The hospital provides resources to help the family and courts determine the patient's need for such services;
 - The hospital maintains a list of names, addresses, and telephone numbers of pertinent state client advocacy groups, such as the state authority and protection and advocacy network that can be provided upon request.
- The hospital protects research subjects and respects their rights during research, investigation, and clinical trials involving human subjects:
 - The hospital reviews all research protocols in relation to its mission, values, and other guidelines and weighs the relative risks and benefits to the research subjects;
 - The hospital provides patients who are potential subjects in research, investigation, and clinical trials with adequate information to participate or refuse to participate in research;
 - Patients are informed that refusing to participate or discontinuing participation at any time will not compromise their access to care, treatment, and services not related to the research.

PATIENT, PARENT AND/OR GUARDIAN RESPONSIBILITIES

In order to provide optimal care for all our patients, it is your responsibility to:

- Providing information. Patients and families, as appropriate must provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalization, medications, and other matters relating to their health. Patients and their families must report perceived risks in their care and unexpected changes in their condition. They can help the hospital understand their environment by providing feedback about service needs and expectations.
- Asking questions. Patients and families, as appropriate, must ask questions when they do not understand their care, treatment, and service or what they are expected to do.

- Following instructions. Patients and their families must follow the care, treatment, and service plan developed. They should acknowledge lack of understanding and express any concerns about their ability to follow the proposed care plan or course of care, treatment, and services. The hospital makes every effort to adapt the plan to the specific needs and limitations of the patients. When such adaptations to the care, treatment, and service plan are not recommended, patients and their families are informed of the consequences of the care, treatment, and service alternatives and not following the proposed course.
- Accepting consequences. Patients and their families are responsible for the outcomes if they do not follow the care, treatment and service plan.
- Following rules and regulations. Patients and their families must follow the hospital's rules and regulations.
- Showing respect and consideration. Patients and their families must be considerate of the hospital's staff and property, as well as other patients and their property.
- Meeting financial commitments. Patients and their families should promptly meet any financial obligation agreed to with the hospital.

JOINT COMMISSION NOTIFICATION

The Baptist Health hospitals have all been accredited by The Joint Commission. Joint Commission accreditation involves evaluating a healthcare organization's performance in areas that most affect patient care and safety. To maintain this accreditation, we participate in on site reviews by a team of Joint Commission healthcare professionals, at least once every three years.

We are committed to providing quality healthcare to our patients. If you have concerns please address these with your nurse. You can also ask to speak with the nurse manager, hospital supervisor or hospital administration by contacting the hospital operator (call "0"). If your concerns are not resolved, you can contact the Joint Commission at (800) 994-6610.

Alabama Department of Public Health Complaint Hotline
(800) 356-9596

Revised October 2009



PATIENT RIGHTS AND
RESPONSIBILITIES

OUR MISSION

As a witness to the love of God through Jesus Christ, Baptist Health exists as a voluntary, not-for-profit organization to promote and improve the physical, emotional, and spiritual well-being of the people and communities it serves through the delivery of quality health care services provided within a framework of fiscal responsibility.

OUR VISION

- Help people in communities we serve maintain and improve their health and quality of life.
- Collaborate with other community organizations to provide needed services.
- Be the healthcare provider of choice for all who need care in the communities we serve.
- Be the employer of choice for healthcare professionals with a positive attitude.
- Be the healthcare system of choice for physicians and other healthcare providers.
- Provide high quality services at appropriate costs.

PATIENT RIGHTS

- The hospital respects the rights of patients as evidenced by:
 - Its policies and procedures that set forth the rights of patients to care, treatment, and services within its capability and mission and in compliance with law and regulation;
 - The right of each patient to have his/her cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected;
 - Its support of the right of each patient to personal dignity; and
 - It accommodates the right to pastoral and other spiritual services for patients.
- Patients receive information about their rights:
 - As to the extent to which the hospital is able, unable, or unwilling to honor advance directives is given upon admission if the patient has an advance directive;
 - To access, request amendment to, and receive an accounting of disclosures regarding his/her own health information as permitted under applicable law.
- Patients are involved in decisions about care, treatment, and services provided and the questions, conflicts or other dilemmas that may arise:
 - A surrogate decision maker, as allowed by law, is identified when a patient cannot make decisions about his/her care, treatment, and service;
 - The legally responsible representative approves care, treatment, and service decisions;
 - The family, as appropriate and as allowed by law, with permission of the patient or surrogate decision maker, is involved in care, treatment, and service decisions.
- Informed consent is obtained by the physician from the patient such that a mutual understanding is established regarding the care, treatment and services the patient receives:
 - The hospital has policies that describe which procedures/care/treatment/services requires informed consent; the process used to obtain informed consent; how informed consent is to be

documented in the medical record; when a surrogate decision maker, rather than the patient, may give informed consent; and when procedures/care/treatment/services normally requiring informed consent may be given without informed consent.

- A complete informed consent process includes the nature of the proposed care, treatment, services, medications, interventions, or procedures; potential benefits, risks, or side effects, including potential problems that might occur during recuperation; the likelihood of achieving goals; reasonable alternatives; the relevant risks, benefits, and side effects related to alternatives, including the possible results of not receiving care, treatment, and services; and when indicated, any limitations on the confidentiality of information learned from or about the patient.
- Consent is obtained for recording or filming made for purposes other than the identification, diagnosis, or treatment of the patient:
 - When recording or filming is to be used only for internal organizational purposes, such as performance improvement and education (a statement of such purpose must be included in the consent document);
 - When recording or filming is made for external purposes that will be heard or seen by the public, such as commercial filming, television programs, marketing (a statement of such purpose must be included in the consent document);
 - The documentation of the consent must be obtained before the recording or filming;
 - When the patient is unable to give informed consent before the recording or filming, such activity may occur before consent, provided it is within the established policy of the hospital and the policy is established through the Ethics Committee that included community input; the recording or film remains in the hospital's possession and is not used for any purpose until and unless consent is obtained; if consent for use cannot subsequently be obtained, the recording or film is either destroyed or the nonconsenting patient must be removed from the recording or film.
 - Patients have the right to request cessation of recording or filming;
 - Patients have the right to rescind consent for use up until a reasonable time before the recording or film is used;
 - Anyone who engages in recording or filming signs a confidentiality statement to protect the patient's identity and confidential information.
- Patients receive adequate information about the person(s) responsible for the delivery of their care, treatment, and services:
 - This includes the name of the physician or other practitioner primarily responsible for and who will provide their care, treatment, and services; and
 - This information is given to the patient on a timely basis as defined by the hospital.
- Patients have the right to refuse care, treatment, and services in accordance with law and regulation. When the patient is not legally responsible, the surrogate decision maker, as allowed by law, has the right to refuse care, treatment, and services on the patient's behalf.
- The hospital addresses the wishes of the patient relating to end-of-life decisions:
 - Adults are given written information about their right to accept or refuse medical or surgical treatment, including forgoing or

withdrawing life-sustaining treatment or withholding resuscitative services;

- The existence or lack of an advance directive does not determine an individual's access to care, treatment, and services;
- Upon request of the patient, the hospital can help or refer the patient for assistance in formulating advance directives;
- A patient's advance directives will be honored within the limits of the law and the hospital's capabilities;
- The hospital will honor the patient's wishes concerning organ donation within the limits of the law or hospital capacity.
- Patients and, when appropriate, their families are informed by the physician or his/her designee about the outcomes of care, treatment, and services that have been provided, including unanticipated outcomes in order for the patient to be knowledgeable of the outcomes in order to participate in current and future decisions of his/her care, treatment and services.
- The hospital respects the patient's right to and need for effective communication:
 - Written information is appropriate to the age, understanding, and language of the patient;
 - The hospital provides interpretation/translation services as necessary;
 - The hospital addresses the needs of those with vision, speech, hearing, language and cognitive impairments;
 - The hospital offers telephone and mail service as appropriate to the setting and population.
- The hospital addresses the resolution of complaints from patients and their families:
 - The hospital informs patients, families, and staff about the complaint resolution process;
 - The hospital receives, reviews, and when possible, resolves complaints from patients and their families;
 - The hospital responds to individuals making a significant or recurring complaint;
 - The hospital informs patients about their right to file a complaint with the state authority;
 - Patients can freely voice complaints and recommend changes without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment and services.
- The hospital respects the needs of patients for confidentiality, privacy, and security:
 - The hospital protects the confidentiality of information about patients and provides for the safety and security of patients and their property;
 - Patients who desire private telephone conversations have access to space and telephones appropriate to their needs.
- Patients have a right to an environment that preserves dignity and contributes to a positive self image:
 - The environment of care supports the positive self-image of patients and preserves their human dignity;
 - The hospital provides sufficient storage space to meet the personal needs of the patients;
 - The hospital allows patients to keep and use personal clothing and possessions, unless this infringes on others' rights or is medically or therapeutically problematic.