

Patient Rights and Responsibilities

A patient at the Memorial Health System has the right to:

A. The right to participate in the development and implementation of his or her plan of care;

B. Or his or her representative (as allowed under state law) has the right to make informed decisions regarding his or her care. The patient's rights include being informed of his or her health status, being involved in care planning and treatment, and being able to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate;

C. The right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives;

D. The right to have a family member or representative of his or her choice and his or her own physician notified promptly of his or her admission to the hospital;

E. The right to personal privacy;

F. The right to receive care in a safe setting;

G. The right to be free from all forms of abuse or harassment;

H. The right to the confidentiality of his or her clinical records;

I. The right to access their medical records, including current medical records, upon an oral or written request, in the form and format requested by the individual if it is readily producible in such form and format (including an electronic form or format when such medical records are maintained

electronically); or, if not, in a readable hard copy form or such other form and format as agreed to by the facility and the individual, and within a reasonable time frame. The hospital must not frustrate the legitimate efforts of individuals to gain access to their own medical records and must actively seek to meet these requests as quickly as its record keeping system permits; 482.13(d)(2)

J. The right to be free from restraints of any form that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff;

K. The right to be fully informed of and to consent or refuse to participate in any unusual, experimental or research project without compromising his/her access to services;

L. The right to know the professional status of any person providing his/her care / services;

M. The right to know the reasons for any proposed change in the Professional Staff responsible for his/her care;

N. The right to know the reasons for his/her transfer either within or outside the hospital;

O. The relationship(s) of the hospital to other persons or organizations participating in the provision of his/her care;

P. The right of access to the cost, itemized when possible, of services rendered within a reasonable period of time;

Q. The right to be informed of the source of the hospital's reimbursement for his/her services, and of any limitations which may be placed upon his/her care;

R. Informed of the right to have pain treated as effectively as possible.

S. A hospital must have written policies and procedures regarding the visitation rights of patients, including those setting forth any clinically necessary or reasonable restriction or limitation that the hospital may need to place on such rights and the reason for the clinical restriction or limitation. A hospital must meet the following requirements:

- Inform each patient (or support person, where appropriate) of his or her visitation rights, including any clinical restriction or limitation on such rights, when he or she is informed of his or her other rights under this section.
- Inform each patient (or support person, where appropriate) of the right, subject to his or her consent, to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend, and his or her right to withdraw or deny such consent at any time.



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- Not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
- Ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences.

T. The patient's family has the right of informed consent for donation of organs and tissues. Patients have the right to address their concerns about patient care and safety to the patient representative at (740) 374-1541 and/or an ethics committee representative. If the patient does not wish to talk with the patient representative, or if the concern is unresolved by the patient representative, the patient may contact the hospital's Chief Executive Officer. Patients have the right to contact the Ohio Department of Health at (800) 342-0553 or visit odh.ohio.gov; or the State Quality Improvement Agency (QIO), Livanta at (888) 524-9900 or visit www.livantaqio.com/en/states/ohio; or our accrediting organization, Healthcare Facilities Accreditation Program at (312) 920-7383 or visit hfap.org.

A patient at MMH and SGH has the responsibility to:

- Provide, to the best of his or her knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other health-related matters.
- Report unexpected changes in his or her condition to the responsible caregiver and/or physician.
- Request information or additional clarification on his or her health status and proposed course of action as it relates to treatment.
- Inform their physician and other caregivers if he/she anticipates problems in following prescribed treatment.
- Communicate any pain that he or she is experiencing to the medical provider.
- Take an active role in the safe delivery of their care.
- Follow the treatment plan recommended by the physician primarily responsible for his or her care. This may include following the instructions of nurses and allied health personnel as they carry out the coordinated plan of care, implement the physician's orders and enforce the applicable hospital rules and regulations.
- Keep appointments and notify the physician or hospital when unable to do so.
- Be responsible for his or her actions if treatment is refused or if a physician's instructions are not followed.
- Assure that the financial obligations of his or her health care are fulfilled as promptly as possible.
- Follow MMH's and SGH's rules and regulations, including the smoking policy, the personal electrical devices policy and the visitation policy.
- The patient is responsible for being considerate of the rights of other patients and hospital personnel and for assisting in the control of noises, smoking and the number of visitors. The patient also is responsible for being respectful of the property of other people and of the hospital.
- Patients and their families must report perceived risks in their care and unexpected changes in their condition.

Language Access Resources:

Memorial Health System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Memorial Health System does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity, transgender, or sex. Memorial Health System provides free aids and services to people with disabilities to communicate effectively with us including:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)



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• Provides free language services to people whose primary language is not English

If you need these services, please let us know.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-740-374-1436
注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-740-374-1436。
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-740-374-1436
مقرب لصنا ، زاچم الب ادل رفاوتت قووغ اله دواسم ال اتام دخ زاف ، قال الدا شدجت تان اذا ، تظوير م -1436-1430 - 1-
Wann du [Deitsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-740-374-1436
ВНИМАНИЕ:Если вы говорите на русском языке, то вам доступны бесплатные усл уги перевода. Звоните 1-740-374-1436
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-740-374-1436
CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-740-374-1436
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-740-374-1436번으로 전화해 주십시오. 1-740-374-1436
ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-740-374-1436
注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-740-374-1436まで、お電話にてご連絡ください。1-740-374-1436
AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-740-374-1436
УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безк оштовної служби мовної підтримки. Телефонуйте за номером 1-740-374-1436.
ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-740-374-1436.
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-740-374-1436.
เรียน: ถ้าคุณพูดภามาไทยคุณสามารถใช้บริการช่วยเหลือทางภามาได้พรี โทร 1-740-374-1436
ध्यान Dदनुहोसः् तपाइग्रले नेपालD बोल्नहन्छ भन तपाइDको Dनिम्त भाषा सहायता सवाहरू Dनःशल्क रूपमा उपलब्ध छ । फोन गनुहोसर् ् 1-740-374-1436
۔ 1436-1436-1،دیریگب سامت اب ،دشاب یم مِعارفامش یارب زاگیار تاروصِب یزابز تالیهست ،دینک یم وگتفگ یسراف زابز هب رگا ،هچوت
رک 1740-374-16 ان ک ـ رایه باین می دنم بن ک ناباز وک پآ وت ،رای سخت بنامدغ یک ددم یک زاباز وک پآ وت ،رای سختانید ودرا پآ رگا، زادربغ

If you believe that Memorial Health System has failed to provide these services or discriminated based on race, color, national origin, age, disability, gender identity, transgender, or sex, you can file a grievance with:

Service Improvement Coordinator Memorial Health System (740)374-1541 grievance@mhsystem.org

If you need assistance filing a grievance, the Service Improvement Coordinator can assist you. A grievance can be filed in person, by mail, fax, phone, or email. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/orc/smartscreen/main.jsf or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD) Complaint forms are available at <u>http://www.hhs.gov/orc/office/file/index.html</u>