

# PATIENT RIGHTS AND RESPONSIBILITIES

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Baptist Health is committed to respect and protect the rights of our patients. Honoring these rights is an important part of respecting and caring for you as a whole person.

## YOUR RIGHTS AS A PATIENT:

### PROFESSIONAL AND PERSONAL CARE

#### You have a right to:

- Be treated in a caring and respectful way.
- Have us respond to your reasonable requests for treatment. Our response will be based on your medical condition, the urgency of your situation and on our ability to provide the kind of care you may need.
- Get care that does not discriminate on the basis of race, ethnicity, culture, language, physical or mental disability, socioeconomic status, sexual orientation, gender identity or expression, religion, age, or sex.
- Get care that is sensitive to your cultural, psychological, spiritual, and personal values, beliefs and preferences.

### PARTICIPATE IN CARE DECISIONS

#### You have a right to:

- Take part in decisions about your care. This includes taking part in your plan of care, treatment, services, discharge plan and any ethical concerns that might happen.
- Get information about your care. This includes information about your diagnosis and prognosis, the care that is suggested and potential benefits, the risks involved in treatments or procedures, alternatives, outcomes of care (including unanticipated outcomes) and the cost of care.
- Give your informed consent before any procedure is performed.
- Give your informed consent for any recording or filming that is done for other purposes than your identification, diagnosis, or treatment. If you give consent, you have the right to stop the recording or filming. You can also withdraw your consent before the recording or film is used (if done within a reasonable amount of time before use).
- Say “No” or refuse care, treatment or services.
- Ask for a second opinion or appropriate transfer to another hospital.
- Give us an advance directive such as a living will, healthcare power of attorney or health care proxy. This tells the hospital and doctor how you want to be treated and whom you want to make decisions for you. Your doctor will tell you if we cannot carry out your advance directive.

### GOOD COMMUNICATION

#### You have a right to:

- Get information that is correct and easy for you to understand.
- Have free interpretation or translation services if you need them.
- Have telephone and mail services.

### PRIVACY AND CONFIDENTIALITY

#### You have a right to:

- Personal privacy. This includes:
  - Being seen by your healthcare team in private.
  - Being able to access a telephone to make a private call.
- Confidentiality about your protected health information. Under the Health Insurance Portability and Accountability Act (HIPAA) your rights include:
  - You may ask to restrict how we use and disclose (or release) your information for treatment, payment and other healthcare operations. You can also restrict information that is given to your family or friends. We are not required to agree with your requests and we will tell you if we are not able to agree.
  - You may ask for a list of who has received your health information under certain circumstances (as we are allowed to give out under the law). There is no charge for the first time you ask for a list in any 12-month period of time. However, we will charge a fee for other requests in a 12-month period.
  - Please note: All your requests must be in writing. Please ask us if you need help.
  - For more information about these HIPAA rights or to ask for a request form, please contact the privacy officer at (334) 273-4437.
- Get a written notice of how your health information will be used and shared. This is called our Notice of Privacy Practices and it contains your rights and our legal duties about your health information.

### ACCESS TO MEDICAL RECORDS

#### You have a right to:

- See and get a copy of your medical record within a reasonable time frame.
- Ask that we make a change to your medical record. We are not required to make all changes but will carefully consider making the changes you want. If we do not make the changes, we will explain why and explain your rights in writing.

## CAREGIVERS

You have a right to:

- Know the names and roles of the people directly involved in your care. This includes the name of your doctor(s) and other practitioners.
- Have your own doctor or practitioner notified if you choose, when you are admitted to the hospital.

## VISITORS

You have a right to:

- Have any visitor you want (the visitor does not have to be legally related to you). We may have to limit or restrict visitors at certain times to protect your health and safety.

Reasons include:

- When you are having certain procedures, tests or treatments.
  - When the visit may interfere with the care of other patients.
  - Any court order that limits or does not allow contact.
  - Behavior that is a direct risk or threat to you, hospital staff, or others in the hospital.
  - Behavior that disrupts how the patient care unit functions.
  - Reasonable limits on the number of visitors at one time.
  - Patient has a risk of getting an infection from a visitor.
  - Visitor has a risk of getting an infection from a patient.
  - Need to control infection because of a pandemic or infectious disease (spreading germs) outbreak.
  - Substance abuse treatment protocols that restrict visits.
  - Your need for privacy or rest.
- Change your mind about who you want for visitors.

## ACCESS TO SERVICES FOR YOUR PROTECTION AND SUPPORT

You have a right to:

- Ask for and get a list of names, addresses, and telephone numbers of state client protection and advocacy (or support) groups.

## A SECURE AND DIGNIFIED SETTING

You have a right to:

- Be free from mental, physical, sexual, and verbal abuse, neglect, harassment and exploitation.
- Be free from seclusion or restraint unless necessary for your safety.
- Be in a setting that supports a positive self-image and preserves human dignity.
- Storage space to meet your personal needs.
- Keep and use personal clothing and possessions (unless this infringes on others' rights or interferes with your medical care).
- Have access to the outdoors if you are in the hospital longer than 30 days (unless it interferes with your medical care).

## FREEDOM FROM UNNECESSARY RESTRAINTS OR SECLUSION

You have a right to:

- Be free from seclusion or restraint unless necessary for your safety.
- If we have to use restraints or seclusion for your safety:
  - It will not be used to force, punish, retaliate or be used for the convenience of our staff.
  - It will not cause physical discomfort or harm.
  - Your rights, dignity and well-being will be protected.
  - We will use the least restrictive method or type of restraint possible.

## PAIN MANAGEMENT

You have a right to:

- Be comfortable and have your pain controlled as much as possible.
- Take part in developing and carrying out your pain management plan.
- Be taught about your part in managing pain, possible limits to managing pain and the side effects of pain management.

## RELIGIOUS AND SPIRITUAL SERVICES

You have a right to:

- Religious and other spiritual services. Baptist Health provides a staff of trained, qualified pastoral counseling providers that are available 24 hours a day, 7 days a week. If you ask, the hospital's chaplain will also contact your patient's minister, priest, rabbi, iman or other spiritual advisor.

## END-OF-LIFE DECISIONS

You have a right to:

- Tell us what you want or do not want for treatment at the end of your life.
- Give us a written advance directive such as a living will, healthcare power of attorney or health care proxy. This tells the hospital and your doctor what kind of treatment you want or do not want at the end of your life. It also tells who you want to make decisions for you if you are cannot speak for yourself.
- You do not have to have a written advance directive. Your access to care, treatment, and services is not determined by whether you do or not have an advance directive.
- Ask us for help in making an advance directive. Please tell your doctor or nurse if you need help.
- Have your advance directive honored (within what the law permits and the hospital's capability).
- Have your wishes about organ donation honored (within what the law permits or the hospital's capability.)

## UNDERSTAND AND GIVE CONSENT FOR RESEARCH TREATMENT

You have a right to:

- Be told about the risks and benefits of research treatment to help you make a decision about taking part in a research study.
- Take part in or refuse to take part in research treatment

that is offered. Refusing to take part in research treatment or stopping research treatment will not affect your access to other care, treatment or services.

## TELL US YOUR CONCERNS OR COMPLAINTS

You have a right to:

- Tell us your concerns or complaints (sometimes called "grievances"). This can be done by talking to us or by writing. Please talk to your doctor, nurse or other care giver about any of your concerns.
- If you have a problem that cannot be solved by them, please call the hospital and ask the operator for the patient advocate or nursing supervisor. We will work hard to resolve your complaint in a timely manner. If you would rather write us, address the letter to the **Chief Nursing Officer** at the hospital.
- Freely voice your complaints and suggestions without it affecting your care, treatment or services.
- Speak to someone outside of Baptist Health about your concerns or complaints. Below are the agencies that you can call or write:
  - Alabama Department of Public Health  
P.O. Box 303017  
Montgomery, Alabama 36130-3017  
Telephone (800) 356-9596
  - The Joint Commission  
Office of Quality Monitoring  
One Renaissance Boulevard  
Oakbrook Terrace, Illinois 60181  
Telephone (800) 994-6610
  - If you have Medicare or Medicaid insurance, you can contact Alabama's Quality Improvement Organization:  
Alabama Quality Assurance Foundation (AQAF)  
Two Perimeter Park South, Suite 200 West  
Birmingham, AL 35243  
Telephone: (800) 633-4227

## YOUR RESPONSIBILITIES AS A PATIENT

We want you to receive the best and safest care possible. We believe this can be done when patients and families are active members of the healthcare team. While in our care, we ask that you and your family:

## GIVE ACCURATE AND COMPLETE INFORMATION

- Tell us all you know about your present illness, other times you have been sick or in the hospital, your health history, your current symptoms, and anything else that you think would be helpful.

- Tell us about:
  - All drugs you are taking including prescriptions, herbal remedies, over the counter medications, natural products, vitamins, alcohol and tobacco use.
  - Any allergies or reactions to medicines, food, adhesive tape, latex, or other things.
  - Anything else that affects your health.
- Tell us right away if:
  - You have an unexpected change in your condition or symptoms.
  - Your pain medicine is not helping you.

## ASK QUESTIONS AND SPEAK-UP

- Tell us right away if:
  - You feel at risk or you are worried or do not feel safe about your care.
  - You are unhappy about your care.
- Ask questions if you do not understand or do not know what you are expected to do.

## FOLLOW INSTRUCTIONS

- Follow the instructions of your doctor, nurse or other caregiver. If you are not able to follow your plan of care instructions, please tell someone right away. Often your plan of care can be changed to make it easier for you to follow.
- Accept responsibility and risk for your choices if you:
  - Choose not to follow your plan of care.
  - Refuse care or treatment.

## OTHER RESPONSIBILITIES

- Show respect and consideration for our staff, doctors, patients, visitors and property.
- Follow the hospital's rules and regulations.
- Prepare to pay your hospital bill. Please give us the information we need to bill your insurance. Let us know if you need help with a payment plan.

## QUESTIONS:

If you have any questions regarding these rights or wish to voice a concern about your rights, you may contact the hospital chaplain, or the nursing supervisor. They can be reached by asking your doctor, nurse or the hospital operator. (Dial 00 is you are using a hospital telephone.)