

**Community Medical Center
Falls City, NE**

Patient Rights and Responsibilities

As a patient at Community Medical Center, you have rights, privileges and responsibilities.

You have the right to:

- Be informed about your rights as a patient before receiving or discontinuing patient care whenever possible.
- Receive care that is respectful of your physical, psychological, cultural, spiritual and family needs in an environment that is safe and healthful.
- Be free from all forms of abuse or harassment.
- Be free from restraints of any form or seclusion that is not medically necessary. Seclusion or a restraint can only be used if needed to improve your well-being and less restrictive interventions have been determined to be ineffective or in emergency situations if needed to insure your physical safety and less restrictive interventions have been determined to be ineffective.
- Know the practitioner in charge of your care and the names and professional roles of all others who provide care.
- Be informed about your health status, treatment options and the risks and benefits of care in terms that make sense to you.
- Make informed decisions and participate in the development and implementation of your plan of care.
- Request treatment that is medically appropriate or to refuse medical treatment to the extent permitted by law.
- Receive treatment that includes prevention or adequate relief of pain.
- Be informed of the medical consequences of your choices.
- Expect that CMC will provide necessary health services to the best of its capability or facilitate referral or transfer.
- Personal privacy, including the right to have your medical information kept confidential.
- CMC will make every effort to promote a private atmosphere to the extent possible.
- Access the information in your medical records within a reasonable time frame.
- Visits and communication with the people you choose.
- Send and receive unopened personal mail.
- Have a family member or representative of your choice and you own physician notified promptly of your admission to CMC.
- Make advance directives – a living will (*also called a Rights of the Terminally Ill Declaration*) and a power of attorney for health care – that state your treatment choices if you can't speak yourself.
- Have CMC staff and practitioners who provide care, comply with your advance directive in accordance with federal and state laws.
- File a patient grievance by completing a grievance form which is available from any employee. The Nebraska Department of Health and Human Services is also available at (402) 471-0316
- The prompt resolution of a grievance.
- Know the financial implications of your treatment choices and to have your bill and available payment methods explained.
- Know if CMC has relationships with outside parties that may effect your treatment.

- Receive continuity of care and information on options for care when the hospital is no longer appropriate.
- If you have an emergency medical condition or are in labor, you have the right to receive, within the capabilities of the medical staff and facilities, an appropriate medical screening examination, necessary stabilizing treatment (including treatment for an unborn child) and if necessary, an appropriate transfer to another facility even if you cannot pay or do not have medical insurance or you are not entitled to Medicare or Medicaid.
- The skilled care patient is transferred or discharged only when necessary for the patient's welfare and the patient's needs can't be met by this facility, the patient no longer needs the services provided, the health and safety of individuals is endangered, for nonpayment his/her stay (except as prohibited by Titles XVIII or XIX of the Social Security Act), or the facility ceases to exist.
- Notice of transfer or discharge of skilled care patients must be made at least 30 days prior to that expected date unless: the health and safety of the individual is endangered, the patient's health improves to allow for more immediate transfer, urgent health needs require more immediate transfer or the resident has not resided in the facility for 30 days. The patient and family (or representative) shall receive this notice in writing, in a language manner in which they can understand. The reason for the transfer or discharge will be communicated to the family as well as documented in his/her medical record by the practitioner. The facility will provide sufficient preparation and orientation to patients to ensure safe and orderly transfer or discharge.

Along with your rights go responsibilities. You have the responsibility to:

- Read the *Rights and Responsibilities Form* or request it to be read to you.
- Ask questions about those parts you do not understand.
- Provide accurate and complete information about current illnesses, medication, any pain or discomfort, past complaints, hospitalizations and other matters related to your health.
- Provide a copy of your written advance directives or ask a staff member if you would like more information about advance directives.
- Report unexpected changes in your condition to your practitioner or nurse.
- Follow the treatment plan that you and your practitioner agreed on or accept responsibility if you do not follow this plan.
- Follow CMC rules and regulations and respect property, materials and equipment belonging to other people and to the facility.
- Keep your belongings in a safe place; CMC is not responsible for replacing lost or broken items.
- Consider the rights of others regarding noise, lights, telephone, television and visitors.
- Ensure payment of the healthcare bill is made promptly and completely.

Community Medical Center does not discriminate on the basis of race, creed, color, sex, national origin, religion, age, disability, the presence or absence of any communicable diseases, marital or veteran status or any other protected class under relevant federal or state law in employment of personnel or in the admission, placement, method of payment or treatment of patients.