

APPENDIX C

PATIENT'S RIGHTS

A policy statement setting forth the rights of patients and prohibiting their mistreatment or abuse is established and made available to staff, patients' families or legal representatives. Written policies and procedures ensure that each patient admitted to the facility is fully informed of his/her rights and responsibilities as a patient in the facility.

A. NOTICE OF RIGHTS

1. Inform each patient of all rules and regulations governing patient conduct and responsibilities. Such information must be provided prior to or at the time of admission or, in the case of patients already in the facility, upon the facility's adoption or amendment of resident right's policies, and its receipt must be acknowledged by the patient in writing. In the case of a mentally retarded individual or of a patient adjudged to be incompetent, the rights described in this provision shall be exercised by the individual's guardian or committee, as applicable under State Law, to act on the patient's behalf.
2. Encourage and assist the patient throughout the period of stay to exercise rights as a patient and a citizen and, to this end, to meet and organize with resident groups, voice grievances and recommend changes in policies and services to facility staff and/or to outside representatives of choice free from restraint, interference, coercion, discrimination or reprisal.
3. Assist each patient to retain and use his/her personal clothing and possessions as space permits.
4. May not require the patient to perform services for the facility.
5. Assure participation in activities of social, religious and community groups at the patient's discretion unless contraindicated for reasons documented by a Qualified Mental Retardation Professional as appropriate in the patient record.

B. NOTICE OF CHARGES FOR SERVICES

1. Inform each patient in writing who is entitled to Medicaid, prior to or at the time of admission and

periodically during the patient's stay, of services available in the facility and of related charges, including any charges for services not covered under the Medicaid Program, or not covered by the facility's basic per diem rate. Only charges by the facility for items or services that are allowable and consistent with the Medicaid Program regulations may be imposed.

2. Maintain admission policies and procedures which do not require patients to waive their rights to apply for Medicaid benefits and do not require third party guarantee of payment to the facility as a condition of admission to, or continued stay in the facility.
3. Provide information to each patient, patient's family and/or patient's representative concerning the availability of assets assessments. Advise them that these assets assessments are available upon request at the county DHHR office whether or not they are applying for Medicaid.

C. FREE CHOICE

Inform each patient of the right to choose a personal attending physician; to be fully informed by the physician of his/her health and medical condition unless medically contraindicated (as documented by a physician in the patient medical record) and of changes in care and treatment. The patient must be offered the opportunity to participate in the planning of his/her total care and medical treatment and participates in experimental research only upon his/her informed written consent.

D. TRANSFER AND DISCHARGE RIGHTS

Transfers and discharges are made only for medical reasons or for the patient's welfare or that of other patients or for nonpayment for stay in the facility, except as prohibited by the Medicaid Program. In a case where the patient's health improves sufficiently so that services provided by the facility are no longer needed, sufficient notice must be provided to the patient and/or family and for adequate discharge planning.

E. PROTECTION OF PATIENT FUNDS

Assure the patient's right to manage his/her personal financial affairs; except, upon written authorization by the patient, the facility will accept responsibility for managing and accounting for the patient's personal funds and

records of such funds. A full and complete accounting must be made available to patients and their families, and is maintained on a current basis for each patient with written receipts for all personal possessions and funds received by or deposited with the facility and for all disbursements made to or on behalf of the patient.

F. FREEDOM FROM RESTRAINTS

1. Assurance of freedom from mental and physical abuse, corporal punishment, involuntary seclusion and freedom from chemical and physical restraints for the purpose of discipline or convenience. Restraints may only be imposed when authorized in writing by a physician for a specific period of time; or, when necessary in an emergency to protect the patient from injury to himself or to others, in which case restraints may be authorized by designated professional personnel who promptly report the action taken to the physician or qualified mental retardation professional for use during behavior modification sessions.
2. A mentally retarded individual participates in a behavior modification program involving use of restraints or aversive stimuli only with the informed consent of his parent or guardian.

G. CONFIDENTIALITY

1. Ensure confidential treatment of all information contained in patient records including information contained in an automatic data bank; and obtain the patient's written consent for the release of information to persons not otherwise authorized under law to receive it.
2. Permit the patient access to his medical records in accord with State law.

H. PRIVACY

1. Assure each patient is treated with consideration, respect and full recognition of his/her dignity and individuality including privacy in treatment and in care for his personal needs.
2. Ensure the patient's right to communicate, associate and meet privately with persons of choice unless to do so would infringe upon the rights of other patients,

and to send and receive personal mail unopened or censored.

3. Permit access to any patient representatives of the Secretary, Department of Health and Human Resources or the State, officially designated Ombudsman, and the patient's attending physician, consistent with State and federal law; and permit access to any patient by the immediate family, or other relatives, subject to the patient's right to deny or withdraw consent at any time; and permit reasonable access to a patient by any entity or individual that provides social or legal services to the patient, subject to the patient's right to deny or withdraw consent at any time.
4. Ensure privacy for spousal visits, and if both are residents in the facility, they are permitted to share a room.

I. RIGHTS OF INCOMPETENT PATIENTS

Written policies provide that all rights and responsibilities of the patient devolve to the patient's guardian, next of kin or sponsoring agency, where:

1. A patient is adjudicated incompetent in accordance with State law; and
2. His physician or, in the case of a mentally retarded individual, a qualified mental retardation professional has documented in the patient's record the specific impairment that has rendered the patient incapable of understanding these rights.