

Notice of Patient Rights

YOUR RIGHT AS A PATIENT

Mission Health is committed to promoting and protecting patient rights as outlined by CMS and the State of North Carolina.

Patient rights include but are not limited to:

THE PATIENT HAS THE RIGHT TO:

- Designate a legal decision maker.
- Be informed of their rights in a manner they understand.
- Receive a copy of their patient rights, included in a copy of the Patient's Information Handbook..
- Be free from discrimination.
- Have a family/own physician notified promptly of admission.
- Enjoy personal privacy, basic respect, dignity and comfort.
- Participate in developing/implementing plan of care.
- Make informed decisions regarding their care.
- Refuse drugs, treatment, or procedures after consultation with a physician.
- Practice their values and beliefs that do not hinder their care
- Receive care in a safe setting.
- Be free from abuse and harassment, including physical/mental abuse and/or corporal punishment.
- Be free from restraint or seclusion, except to protect immediate physical safety.
- When necessary, receive safe implementation of restraint or seclusion by trained staff.
- Be informed of the visitation policy, including the right to identify a patient support person who may be different from a decision maker.
- Confidentiality of their clinical records.
- Have access to their medical records.
- Formulate Advanced Directive.

WHERE APPLICABLE, THE LEGAL DECISION MAKER HAS THE RIGHT TO:

- Be informed of the patients health status.
- Make informed decision about care.
- Be informed about Advance Directives.
- Request medically necessary/appropriate treatment.
- Access to clinical record according to policy.
- Refuse treatment (some restrictions apply).
- Perform other functions as described in Hospital Policy.

THE IMPORTANT MESSAGE (IM) FROM MEDICARE NOTICE:

- Must be delivered to Medicare patients within 2 days of admission.
- A signed copy of the IM must be presented to the patient in advance of the patient's discharge.
- Medicare patients have a right to appeal any discharge they think is premature.
- We must tell the patient where and how to appeal.
- Appeals go to the State Quality Improvement Organization.

THE PATIENT HAS A RIGHT TO SUBMIT A GRIEVANCE REGARDING THEIR CARE:

- Hospital must give an explanation of the internal process for submitting a grievance.
- Hospital must provide the phone number and address for submitting a grievance with the State agency.
- Must inform the patient that the grievance may be submitted to the state agency whether or not the Internal process is used.

**EVERYONE HAS A RESPONSIBILITY TO REPORT ANY CONCERNS PERTAINING TO PROMOTING AND PROTECTING PATIENT RIGHTS.
Reporting a concern may be done by calling the Corporate Compliance Hotline at 1(877) ETHICSI**

If your concerns cannot be resolved by Mission Health, you may report them to our accrediting body or the state agency listed below:
The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181. Toll Free: (800) 994-6610 <http://www.jointcommission.org>
Division of Health Services Regulation, Mail Services Center, Raleigh, North Carolina 27699-2701. Toll Free: (800) 624-3004
Go To Website - See more at: <http://www.mission-health.org/patient-rights#sthash.OsAbllu4.dpuf->