PATIENT RIGHTS

The Governing Body of The Surgery Center at Deborah, LLC (Facility) adopts and affirms as policy the following rights of patient/clients who receive services from our Facility. The Facility will provide the patient, the patient's representative or surrogate verbal and written notice of such rights in advance of the procedure in accordance with 42 C.F.R. § 416.50 Condition for Coverage- Patient Rights and in accordance with N.J.A.C.8:43A-16.1; 8:43A16.2; 8:43A-16.3. The patient rights are as follows:

- To be informed of these rights, as evidenced by the patient's written acknowledgement, or by documentation by staff in the medical record, that the patient was offered a written copy of these rights and given a written or verbal explanation of these rights in terms the patient could understand. The facility shall have a means to notify patients of any rules and regulation it has adopted governing patient conduct in the facility.
- To be informed of services available in the facility, of the names and professional status of the personnel providing and/or responsible for the patient's care, and of fees and related charges, including payment, fee, deposit, and refund policy of the facility and any charges for services not covered by sources of third-party payment or not covered by the facility's basic rate.
- To be informed if the facility has authorized other health care and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identify and function of these institutions, and to refuse to allow their participation in the patient's treatment.
- To receive from the patient's physician(s) or clinical practitioner(s), in terms that the patient understands, and explanation of his or her complete medical/health condition or diagnosis, recommended treatment, treatment options, including the option of no treatment, risk(s) of treatment, and expected result(s). If this information would be detrimental to the patient's health, or if the patient is not capable of understanding the information, the explanation shall be provided to the patient's next of kin or guardian. This release of information to the next of kin or guardian, along with the reason for not informing the patient directly, shall be documented in the patient's medical record.
- To participate in the planning of the patient's care and treatment, and to refuse medication and treatment. Such refusal shall be documented in the patient's medical record.
- To be included in experimental research only when the patient gives informed, written consent to such participation, or when a guardian gives such consent for an incompetent patient in accordance with law, rule and regulations. The patient may refuse to participate in experimental research, including the investigation of new drugs and medical devices.
- To confidential treatment or information about the patient.
- To voice grievances or recommend changes in policies and services to facility personnel, the governing authority, and/or outside representatives of the patient's choice either individually or as a group, and free from restraint, interference, coercion, discrimination, or reprisal.
- To voice grievances regarding treatment or care that is of fails to be provided.
- To be free from neglect, mental, physical, and sexual abuse, free from exploitation, and free from use of restraints unless they are authorized by a physician for a limited period of time to protect the patient or others from injury. Drugs and other medications shall not be used for discipline of patient or for convenience of facility personnel.
- Information in the patient's medical record shall not be released to anyone outside the facility, without the patient's approval, unless another health facility to which the patient was transferred requires the information, or unless the release of the information is required and permitted by law, a third-party payment contract, or a peer review, or unless the information is needed by the Department for statutorily-authorized purposes.
- The facility may release data about the patient for studies containing aggregated statistics when the patient's identity is masked.
- To be treated with courtesy, consideration, respect, and recognition of the patient's dignity, individually, and right to privacy, including, but not limited to, auditory and visual privacy. The patient's privacy shall also be respected when facility personnel are discussing the patient; to not be required to perform work for the facility unless the work is part of the patient's treatment and is performed voluntarily by the patient. Such work shall be in accordance with local, State, and Federal laws and rules.
- To exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, or any attendance to religious services, shall be imposed upon any patient.
- To not be discriminated against because of age, race, religion, sex, nationality, or ability to pay, or deprived of any constitutional, civil, and/or legal rights solely because of receiving services from the facility. Treatment without discrimination as to age, race, color, religion, sex, national origin, political belief, or handicap. It is our intention to treat each patient as a unique individual in a manner that recognizes their basic human rights.

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- To expect and receive appropriate assessment, management and treatment of pain as an integral component of that person's care in accordance with N.J.A.C.§8:43E-6.
- Be free from any act of discrimination or reprisal against the patient merely because he or she has exercised their rights.
- The patient may wish to delegate his/her right to make informed decisions to another person, even though the patient is not incapacitated. To the extent permitted by State law, the ASC must respect such delegation.
- Receive information necessary to give informed consent prior to the start of any procedure and/or treatment, except for emergency situations. This information shall include as a minimum an explanation of the specific procedure or treatment itself, its value and significant risks, and an explanation of other appropriate treatment methods, if any.
- The facility will provide the patient or, as appropriate the patient's representative or surrogate with written information concerning its policies on advance directives, including a description of applicable State health and safety laws and, if requested, official State advance directive forms, if such exist. Access to health care at this facility will not be conditioned upon the existence of an advance directive.
- You may appoint a patient representative or surrogate to make health decisions on your behalf, to the extent permitted by law.
- A reasonable response to your request for services customarily rendered by the facility, and consistent with your treatment.
- To expect reasonable continuity of care and to be informed by the person responsible for your health care, of possible continuing health care requirements following discharge.
- To be advised of the facility grievance process. The investigation of all grievances made by a patient, the patient's representative or surrogate regarding treatment of care that is (or fails to be) furnished. Notification of the grievance process includes: who to contact to file a grievance, and that the patient, the patient's representative or surrogate will be provided with a written notice of the grievance determination that contains the name of the contact person, the steps taken on his or her behalf to investigate the grievance, the results of the grievance, and the grievance completion date.
- Complaints or criticisms will not serve to compromise future access to care at this facility. Staff will gladly advise you of procedures for registering complaints or to voice grievances including but not limited to grievances regarding treatment or care that is (or fails to be) furnished.
- Participate in the development, implementation, and revision of his/her care plan.

Complaints

- Complaints may be directed to the following: The Surgery Center at Deborah, ATTN: Administrator, 6 Earlin Avenue, Ste 320, Browns Mills, NJ 08015 and/or call 609-297-5279
- Complaints may be directed to the following State Agency: <u>www.nj.gov/health/healthcarequality/patients-families/file-complaint-how-to/</u> or to <u>www.nj.gov/health/healthfacilities/file_complaint.shtml</u>; Written to: New Jersey Department of Health, Division of Health Facility Survey and Field Operations, P.O. Box 367, Trenton, NJ 08625-0367; Health Complaint Hotline, 800-792-9770 / 24 hours a day. Fax: 609-943-3013
- Web site for the Medicare Beneficiary Ombudsman: <u>https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home</u>
- Web site for the Ombudsman for the Institutionalized Elderly: <u>ombudsperson@ooie.nj.gov</u>; Call Intake Line: 1-877-582-6995; Write to: The Office of the Ombudsman, P.O. Box 852, Trenton, NJ, 08625-0852;Fax: 609-943-3479