

## INTEGRATED PATIENT/CLIENT RIGHTS AND RESPONSIBILITIES

We want to encourage you, as a patient/client at Access Carroll, to speak openly with your integrated health care team, take part in your treatment choices, and promote your own safety by being well informed and involved in your care, treatment and services. Because we want you to think of yourself as a partner in your care, we want you to know your rights as well as your responsibilities while being served at our facility. We invite you and your family to join us as active members of your care team.

### YOUR RIGHTS:

- You have the right to be treated in a dignified and respectful manner that supports your dignity.
- You have the right to be free from discrimination based upon age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, gender/sex, sexual orientation, and gender identity or expression.
- You have the right to have respect shown for your cultural and personal values, beliefs and wishes.
- You have the right to receive personal privacy and privacy of health information.
- You have the right to access, request amendment to, and obtain information on disclosures of your health information, in accordance with law and regulation.
- Only in an emergency, or if required by law, can your records be released without patient/client permission.
- You have the right to receive effective communication.
- You have the right to receive information in a manner tailored to your age, language and ability to understand.
- You have the right to receive information in a manner that meets your needs, when you are impaired by vision, speech, or hearing or have cognitive impairments. As necessary, you have the right to be provided with interpreting and translation services.
- You have the right to be involved in making decisions about your care, treatment or services. If you are a competent adult you may include family and friends, with your consent, in these decisions.
- You have the right to appoint an individual of your choice (surrogate decision-maker) to make health care decisions for you, in the event that you are unable to do so.
- You have the right to refuse care, treatment, or services and to receive information about this in writing. Your surrogate decision maker has the right to refuse care, treatment, or services on your behalf. If you end care, treatment, or services against the advice of your integrated care provider, Access Carroll and staff will not be responsible for any consequences that may occur.
- You have the right to give informed consent before any non-emergency care is provided, including the benefits and risks of the care, alternatives to the care, and the benefits and risks of the alternatives to the care.
- You have the right to give or withhold informed consent to applicable care, treatment, or services, according to established organizational policies.
- You have the right to receive information about the outcomes of your care, treatment, or services that is needed to participate in current and future decision making.
- You have the right to be informed about anticipated outcomes of care, treatment, or services that relate to sentinel events.
- You have the right to agree or refuse to take part in medical research studies, without the agreement or refusal affecting your care, treatment, or services.
- You have the right to be told the names and jobs of the integrated care team members involved in your care, if staff safety is not a concern.
- You have the right to make or change an advance directive. If you do not have an advance directive, we can provide you with information and help you complete one.
- You have the right to be provided care in a safe environment free from all forms of exploitation and neglect, as well as from verbal, mental, physical, and sexual abuse.
- You have the right to be informed of your responsibilities related to your care, treatment, or services.
- You have the right to provide feedback on program policies and services through completion of satisfaction surveys.
- You have the right to have complaints acknowledged, reviewed, and (when possible) resolved by the organization and to receive information about the outcome of the complaint.

### YOUR ADDITIONAL RIGHTS AS A BEHAVIORAL HEALTH SERVICES CLIENT:

- You have the right to be informed of your rights at a time when you are able to understand.
- You have the right to be informed of program rules.
- You have the right to request the opinion of a consultant.
- You have the right to request an internal review of your plan of care, treatment, or services.
- You have the right to allow or refuse to allow picture-taking for purposes other than for your care. You have the right to withdraw consent up until a reasonable time before the photo is used.
- You have the right to be provided care in an environment that preserves dignity and contributes to positive self-image.
- You have the right to keep and use personal clothing and possessions, unless therapeutically contraindicated or when doing so infringes on others' rights.
- You have the right to have an environment that minimizes distractions that interfere with therapeutic activities.
- You have the right to access protective and advocacy services.
- You have the right to receive information necessary to file a complaint with relevant state authorities.

### YOUR RESPONSIBILITIES:

- You are expected to provide complete and accurate information, including your full name, address, home telephone number, date of birth, Social Security number, insurance carrier and employer when it is required.
- You should provide your care provider with a copy of your advance directive if you have one.
- You are expected to provide complete and accurate information about your health and medical history, including present condition, past illnesses, hospital stays, medicines, vitamins, herbal products and any other matters that pertain to your health, including perceived safety risks.
- You are expected to ask questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment plan, you are responsible for telling your care provider. You are responsible for outcomes if you do not follow care, treatment and service plans.
- You have the responsibility to follow your medication plan. You must tell your care provider(s) about medication changes, including medications given to you by other providers.
- You are expected to show respect and consideration for Access Carroll's staff and property, as well as other individuals and their property; abide by all rules and safety regulations; and be mindful of noise levels and privacy.
- You should not take actions that could harm the lives of Access Carroll, Inc. employees, providers, or other integrated staff members.
- You have the responsibility to keep appointments, be on time and call your health care provider if you cannot keep your appointments.
- You are expected to provide complete and accurate information about your health insurance coverage and to pay your bills in a timely manner.
- You have the responsibility to let your care provider(s) know about problems with paying fees.
- You have the responsibility to report abuse and fraud.
- You have the responsibility to openly report concerns about the quality of care you receive.
- Consistent with Maryland law, patients and their families and friends are responsible for obtaining the consent of all participants before recording or videoing a conversation of them in person or on the phone. Physicians, nurses and all other staff are legally entitled to decline being recorded.

### **YOU HAVE THE RIGHT TO FILE A COMPLAINT ABOUT CARE AND HAVE THE COMPLAINT REVIEWED WITHOUT THE COMPLAINT AFFECTING YOUR CARE:**

If you have a problem or complaint, you may talk with your care provider, nurse, manager or other department manager. If you wish to talk to someone outside the department, you may also contact the Access Carroll Business Operations Manager at 410-871-1478 or the Services Coordinator at the Carroll County Health Department (410-876-2152). If you believe that Access Carroll has failed to provide these services or discriminated in another way, you can file a grievance with the Access Carroll Business Operations Manager at 410-871-1478. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. The Joint Commission: To report a patient safety concern: Use the "Report a Patient Safety Concern" link on the home page of the website, [www.jointcommission.org](http://www.jointcommission.org), Send a fax to (630)-792-5636; Send mail to: The Office of Quality and Patient Safety (QOPS), The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181. Reports of patient safety events to The Joint Commission must include the health care organization's name, street address, city and state.