

All patient complaints are taken seriously. Patient complaints may originate from the survey process or other avenues, such as verbal complaints to an employee.

- Employees hearing or receiving any complaints are to document it in a variance report.
- Variance reports are reviewed by Compliance/Risk Management Director and routed to the appropriate director for follow-up with patient. Complaints involving privacy are also referred to Burgess Health Center's Compliance Privacy Officer.
- Results of patient contacts are reported on the follow-up form and given to administration to assure appropriate follow-up.
- When privacy is involved:
 - a) The Privacy Officer will work with the department director to:
 - (1) Mitigate the known harmful effects of the inappropriate use or disclosure
 - (2) Change policies and procedures if deemed necessary to prevent future inappropriate use or disclosures
 - (3) Provide training to staff if deemed necessary to prevent future inappropriate use or disclosures
 - (4) Work with the department director to sanction, in accordance with the Burgess disciplinary policy, individuals responsible for the inappropriate use or disclosure
 - (5) Communicate, as necessary, with business associates responsible for the inappropriate use or disclosure
 - b) The Privacy Officer will notify the complainant of the findings of the investigation and action taken. The findings of the investigation and the disposition of the complaint will be recorded and kept in a secure area of the Privacy Officer's office.

This policy is issued by the Compliance & Risk Management Department.

Patients who are not satisfied with follow-up to their complaints may file a grievance with Burgess.

- All grievances, written or verbal, will be referred to the Director of Compliance/Risk Management to initiate the process.
- The Director will meet with the patient and/or family within two (2) working days of the initiation of the process.
- The director of the department involved, their supervisor, and the CEO will be notified.
- The director and their supervisor will be responsible for investigating the grievance, meeting with the appropriate staff and documenting the process and response. This will be completed within 10 working days of the receipt of the grievance.
- Immediately following the investigation, the Director of Compliance/Risk Management will notify the patient in writing of Burgess's decision involving the grievance. The notification will contain the name of the contact person, the steps taken on behalf of the patient to investigate the grievance, the results of the grievance process, and the date of completion.
- Sleep Study Clients may contact the Accreditation Commission for Health Care (ACHC) at their toll free number, 1-855-937-2242, to report any issues/complaints/grievances related to their sleep study.

A patient issuing a complaint or grievance will not impact their future care at Burgess Health Center.

- No member of Burgess Health Center's workforce or management will engage in acts to intimidate, threaten, coerce, discriminate or retaliate against individuals or organizations who:
 - File a complaint under this policy
 - File a complaint with regulatory authorities
 - Testify or otherwise assist with an investigation, compliance review, hearing or other proceeding
 - Oppose acts or practices made unlawful by HIPAA, provided the individual or organization has made a good faith belief the act or practice is unlawful, and the opposition is reasonable.



**PATIENT RIGHTS at
BURGESS HEALTH CENTER**

We value the rights of our patients at Burgess Health Center. The following information is our policy regarding patient rights.

As a patient, you have certain rights and responsibilities. We feel that if you understand them, you can contribute to the effectiveness of your treatment and the quality of patient care. The following is a list of Patient Rights and Responsibilities, which reflect our concern and commitment to you as a patient and a human being. This list refers to all patients, parents, or guardians if the patient is a neonate, child, or adolescent.

All Burgess employees and medical staff are responsible for ensuring that patient, parent, guardian or legal representative's rights are respected and enforced. It is the ultimate responsibility of the Director of Compliance and Risk Management to ensure compliance with this policy.

Copies of Patient Rights and Responsibilities will be:

- Posted in patient care areas.
- Available to all patients upon request.
- Written copies will be placed in all inpatient rooms.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística

The patient/parent/guardian/patient's legal or personal representative is entitled to:

- Considerate and respectful care.
- Impartial access to medically indicated treatment regardless of race, color, creed, sex, national origin, disability, diagnosis, or sources of payment for care.
- Have an advance directive (such as a living will or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that Burgess staff and practitioners will honor that directive to the extent permitted by law.
- Know by name the healthcare provider responsible for the coordination of your care and the identities of others involved in providing your care and have your health care provider notified of your admission.
- Obtain information from healthcare providers and other direct caregivers in understandable terms concerning diagnosis, treatment, prognosis, and plans for discharge and follow-up care. Expect Burgess to be transparent about all information/issues affecting your care.
- Make decisions about your care and refuse treatment to the extent permitted by law and be informed of the medical consequences of such action.
- Effective assessment and management of pain as appropriate to the medical diagnosis or surgical procedure as well as education about pain relief options.
- Consideration of privacy in case discussion, consultation, examination, and treatment. You may request transfer to another room if another patient or visitors in that room are unreasonably disturbing you.
- Expect that all communications and records pertaining to your care be treated as confidential by Burgess, except in cases such as suspected abuse or public health hazards which are required by law to be reported.
- Review your medical records and have information explained or interpreted as necessary, except as restricted by laws, within a reasonable time frame.
- Expect Burgess to respond to your requests for service, within its capacity, and to provide

- evaluation, service, or referral by the urgency of your care needs.
- Obtain information as to any relationship between Burgess and other health care and educational institutions, which may influence your care.
 - Consent or refuse to participate in any treatment that is considered experimental in nature, and to have those studies fully explained prior to consent.
 - Participate in decisions regarding ethical issues surrounding your care.
 - Participate in development and implementation of the plan of care.
 - Receive care in a safe setting, free from all forms of abuse or harassment.
 - To be free from any physical or chemical restraints imposed for purposes of discipline or convenience, and not required to treat medical symptoms.
 - Obtain information about Burgess policies that relate to your care.
 - Express a concern or complaint regarding your care to the attending healthcare provider, nurse assigned to you, the nurse in charge, or department director. You have the right to call the switchboard at any time and ask to speak to administration regarding a complaint. You have the right to a timely response to your concern or complaint and a resolution when possible. Expression of concern or complaint will not compromise your care or future access to care.
 - Have your spiritual, psychosocial, and cultural beliefs respected.
 - Examine and receive an explanation of your Burgess bill, regardless of the source of payment.
 - Be called by name or nickname as desired.
 - Have family or their representative or designated personal representative notified of admission.
 - Be informed of the right, subject to his/or her consent, to receive the visitor(s) whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. Have the right to withdraw or deny consent at any time, either orally or in writing. That visitors are not restricted, limited or otherwise denied visitation privileges on the basis of

race, color, national origin, religion, sex, sexual orientation, gender identity or disability and that all visitors designated by the patient enjoy visitation privileges that are no more restrictive than those that immediate family members enjoy.

The Patient/Parent/Guardian has the following responsibilities:

- Ask questions about specific problems and request information when you do not understand the illness or treatment.
- Provide accurate and complete medical information to healthcare providers and other caregivers.
- Provide Burgess with a copy of your written advance directive if you have one.
- Follow the treatment plan recommended by healthcare providers and other caregivers, or if treatment is refused, you are responsible for your actions and the medical consequences.
- Consider the rights of Burgess personnel and other patients and ensure that your visitors are considerate in the control of noise, limiting numbers of visitors, and abstaining from smoking.
- Respect Burgess property and the property of other patients.
- Follow all Burgess policies affecting patient care and conduct.
- Provide necessary information to ensure processing of Burgess bills and make payment arrangements when necessary.
- Notify staff of name by which you prefer to be called.