

KCMH Policies and Procedures			
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Rights as a Kiowa County Memorial Hospital (KCMH) Patient

Bringing excellent health care is not only our mission and commitment, it is our life. Our entire focus is on a patient's individual health care needs. Our goal is to respect dignity and choices. It is assured that every patient receives equal attention and equal access to all of our services. There is no discrimination in regard to race, national origin, sexual orientation, religion, age, sex, disability or economic status.

This listing of patient rights serves to inform patients of their options regarding treatment or refusal of treatment. These rights apply to all patients. If a patient is unable to exercise any or all of these rights, it is Kansas law that their guardian, next of kin or legally authorized representative may enforce these rights on their behalf.

Patients within the Limits of Law:

- Have the right during the admission process, to be informed of their rights as a KCMH patient, including information on KCMH's patient rights policy and KCMH's mechanism for resolving patient complaints and grievances ;
- Have the right to receive respectful care given by competent personnel in a safe setting without discrimination based upon race, color, religion, sex, national origin or source of payment.
- Have the right to request to be given the name of their attending physician, names of all practitioners directly participating in their care and the names and functions of other health care persons having direct contact with them
- Have the right to help make health care decisions and have the right to information necessary to make treatment decisions reflecting the patient's wishes and to request a change in their provider or transfer to another

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health facility due to religious or other reasons;

- Have the right to accept medical care, to refuse treatment to the extent permitted by state law and to be informed of the medical consequences of refusing; If your refusal of treatment prevents the provision of appropriate care in accordance with accepted professional standards, your relationship with the hospital may be terminated upon reasonable notice;
- Have the right to freedom from abuse, neglect or harassment;
- Have the right to have a person of your choice present during a physical examination, treatment or procedure in accordance with Hospital policy;
- Have the right to refuse to talk with or see anyone not officially connected with the hospital, including visitors, or persons officially connected with the hospital but not directly involved in your care;
- Have the right to be informed of health status, and participate in the development and implementation of a plan of care and has the right to assistance in obtaining consultation with another physician or practitioner at the patient's request and own expense;
- Have the right to create advance directives and have hospital staff and practitioners who provide care in the hospital comply with these directives;
- Have the right to have a family member or representative of choice and a patient's own provider notified promptly of hospital admission;
- Have the right to have reports of pain accepted/acted on by health care professionals; Effective management of pain;
- Have the right to personal privacy; to be interviewed, examined and to attend to your personal hygiene in surroundings designed to assure

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reasonable audio-visual privacy;

- Have the right to confidentiality of clinical records;
 - Each patient or patient’s legally designated representative has access to the information contained in the patient’s medical records within the limits of law;
 - Have the right to be informed of any research or educational projects affecting care or treatment;
 - Have the right to examine and receive an explanation of the bill for services;
 - Have the right to freedom from seclusion and restraints, including physical restraints and drugs, unless seclusion or restraint is medically necessary or is imposed to ensure safety in emergency situations;
 - Have the right to request spiritual guidance, have visits, prayers, and sacramental ministrations by clergy of choice, and to refuse such visits if not desired;
 - Have the right to appoint a surrogate to make health care decisions on a patient’s behalf and the right to formulate advance directives;
 - Have the right to participate in the consideration of ethical issues that arise in their care;
 - Have the right to request to opt out of our public patient listing;
 - Have the right to reasonable response to requests/needs for treatment or service, within the hospital’s capacity, stated mission, applicable law and regulation;
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- Have the right to express a complaint and have it handled in a discreet and timely manner by any employee of KCMH. Have the right to have a written copy of KCMH's Patient Rights and Responsibilities;
- Have the right to visitors and to access people outside the hospital by means of verbal and written communication;
- Have the right if they do not speak or understand English, to an interpreter or interpretive services, as quickly as possible;
- Have the right if they need hearing, vision or other communication services, to assistance in the most effective and timely manner possible;
- Have the right to request a review by a Quality Improvement Organization (QIO) of:
 1. Any written Notice of Non-coverage that you receive from the hospital stating that Medicare will no longer pay for your hospital care.
 2. Concerns regarding quality of care, disagreement with a coverage decision, or premature discharge.

The QIO for our area is:

Kansas Foundation of Medical Care
2947 Southwest Wanamaker Drive
Topeka, Kansas 66614
1-800-432-0407

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As a Kiowa County Memorial Hospital, a patient is responsible for:

- Providing, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, alternative therapy and other matters relating to their health;
- Reporting unexpected changes in condition to the medical provider or nurse;
- Informing the medical provider or nurse if they do not understand the plan of treatment and what is expected of them; Asking questions when they do not clearly understand a contemplated course of action and what is expected of them;
- Telling staff when they have a complaint about their Hospital experience;
- Knowing and following the treatment plan prescribed by the medical team; they are responsible for the outcome when refusing treatment or not following a practitioner's instructions
- Making and keeping appointments and notifying the appropriate staff when unable to do so;
- Accepting responsibility for outcomes related to refusing treatment or not following the medical team's instructions;
- Paying bills or making arrangements to pay their bill within a reasonable time;
- Demonstrating consideration for the rights of visitors, staff and other

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patients (including another patient's right to confidentiality)

- Respecting KCMH's property and the property of other persons.

Speak Up: Help Prevent Errors in Patient Care

Our goal is to exceed patient expectations. To file a complaint (verbal or written), a patient can contact one of the following so we can work together toward a timely (10 days) and satisfactory resolution of the situation. We want patients to speak up if they have questions or concerns. We encourage patients to be a full partner in their health care experience and encourage any employee that should hear a patient concern/complaint to encourage the patient to submit it in the following manner:

For submitting/resolution of complaints, patients should submit their concern in writing to or call:

**Kiowa County Memorial Hospital
Attention: KCMH Administrator
721 W. Kansas
Greensburg, KS 67054
Phone (620) 723-4201**

All patient concerns/complaints will be addressed within 10 working days by the Administrator

A patient also has the right to file a grievance with the Kansas Department of Health and Environment directly, regardless of whether they have used the hospital's grievance process or not.

Kansas Department of Health & Environment

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**1000 SW Jackson St., Suite 200
Topeka, KS 66612-1365**

Phone 1-800-842-0078