

RENAISSANCE SURGERY CENTER

Patient Rights:

The Renaissance Surgery Center and its medical staff have adopted the following statement of patient rights. The ASC patient has a right to:

1. Considerate and respectful care, provided in a safe environment, free from all forms of abuse or harassment. The patient may exercise these rights without regard to sex or cultural, economic, educational or religious background or the source of payment for care.
2. Full consideration of privacy concerning his/her medical care program. Health care professionals will conduct all confidential case discussions, consultations, examinations and treatments discretely. The patient has the right to be advised of the reason for the presence of any individual involved in his/her healthcare.
3. Confidential treatment of all communications and records pertaining to his/her care and his/her visit to the facility. (Except when the law requires, patients have the opportunity to approve or refuse the release of their records).
4. Access to information contained in his/her medical record within a reasonable frame of time, (within 48 hours of request, excluding weekends and holidays), to include information regarding diagnosis, evaluation, treatment and prognosis. If it is medically inadvisable to give such information to a person designated by the patient, or a legally authorized person shall have access to the patient's information.
5. Participate in the development and implementation of his/her plan of care and actively participate in decisions regarding his/her medical care. To the extent permitted by law, this includes the right to request and/or refuse treatment. Information from his/her physician about a patient's illness, his/her course of treatment, (including unanticipated outcomes), and prospects for recovery in terms he/she can understand.
6. Know the physician performing the procedure may have financial interest or ownership in this ASC. Disclosure of this information will be in writing and furnished in advance of the date of the procedure in a language and manner the patient or the patient's representative understands. The exception to this is if the physician finds the need for the procedure to be done on the same day as scheduled, and then should be completed during the registration/ admission process.
7. Services provided at the facility and reasonable responses to any reasonable request he/she may make for service.
8. The continuing healthcare requirements and instructions following his/her discharge from the facility. The facility services are not intended for emergency care, therefore all practitioners will direct after hours' care to the closest emergency room.
9. Examine and receive the fees for service. Upon request and prior to the initiation of care or treatment, receive an estimate of the facility charges, potential insurance payments and an estimate of any co-payment, deductible, or other charges not paid by insurance.
10. Refuse to participate in experimental research.
11. Provide the patient or patient representative in advance of the date of the procedure the policy on advance directives, and living wills in the facility in a language and manner the patient or the patient's representative understands. The exception to this is if the physician finds the need for the procedure to be done on the same day as scheduled, and then should be completed during the registration/ admission process. Information concerning advance directives will be made available, including a description of the state health and safety laws, and if requested, official state advance directive forms. Documentation of whether or not the individual has executed an advance directive will be in each patient chart.
12. Knowledge of the credentialing process for medical staff. This is available to patients upon request.
13. Knowledge of the name of the physician who has primary responsibility for coordinating his/her care and the names and professional relationships of other physicians and healthcare providers who will see him/her. The patient has the right to change his/her primary physician if another is available. Knowledge of the name of the person who will carry out the procedure or treatment.
14. Understandable marketing or advertising methods used by the facility identifying the competence and skill of the organization. These will be clear and unambiguous to patients or potential patients.
15. As much information about any proposed treatment or procedure as needed in order to give informed consent or to refuse the course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in the treatment, any alternate courses of treatment or non-treatment and the risks involved in each.
16. The facility will either maintain documentation of the appropriate liability insurance coverage of the physicians or inform patients the physician does not carry malpractice insurance. It is the policy of the ASC for all physicians to carry malpractice insurance.
17. Be advised of the facility's grievance process should the patient wish to communicate a concern regarding treatment or care that is (or fails to be) delivered.
18. Become informed of his/her rights as a patient when discontinuing care or leaving the facility against his/her physicians advice. The patient may appoint a representative to receive this information should he/she so desire.

19. Appropriate assessment and management of pain.
20. Reasonable continuity of care. The facility does not have after hours or overnight care. The medical staff will arrange transfer of any patient to a hospital if after hours or overnight care is required.
21. Remain free from seclusion or restraints of any form not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff.
22. Have a family member or representative of the patient's choice notified promptly of his/her admission to the facility as well as notification of his/her personal physician, if requested by the patient.
23. The right to express spiritual and cultural beliefs.
24. The right to information regarding the patient's outcomes of care including unexpected outcomes.
25. If a patient is adjudged incompetent under applicable state laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under state law to act on the patient's behalf.
26. If a state court has not adjudged a patient incompetent, any legal representative or surrogate designated by the patient in accordance with state law may exercise the patient's rights to the extent allowed by state law.

Special Pediatric Considerations

In addition to the rights and responsibilities of adult patients, the needs of children/adolescents and they, with their parents/guardians, shall have the following rights:

1. Respect for each child and adolescent as a unique individual, the care-taking role and individual response of the parent
2. Provision for normal physical and physiological needs of a growing child to include nutrition, rest, sleep, warmth, activity and freedom to move and explore.
3. Consistent, supportive and nurturing care which:
 - Meets the emotional and psychosocial needs of the child
 - Fosters open communication
4. Provision for self-esteem needs which will be met by attempts to give the child:
 - The reassuring presence of a caring person, especially a parent
 - Freedom to express feelings or fears with appropriate reactions
 - As much control as possible, over both self and situation
 - Opportunities to work through experience before and after they occur, verbally, in play or in other appropriate ways
 - Recognition and reward for coping well during difficult situations
5. Provision for varied and normal stimuli of life which contributes to cognitive, social, emotional and physical developmental needs:
 - Play, educational and social activities essential to all children and adolescents
6. Information about what to expect prior to, during and following procedure/experience and support in coping with it.
7. Participation of children/families in decisions affecting their own medical treatment.
8. Minimization of ASC stay duration by recognizing discharge planning needs.

Patient and Family Responsibilities:

The care a patient receives depends partially on the cooperation of the patient. Therefore, in addition to these rights, a patient has certain responsibilities as well. Staff personnel should present these responsibilities to the patient in the spirit of mutual trust and respect.

1. The patient has the responsibility to provide accurate and complete information concerning his/her present complaints, past illnesses and hospitalizations, and other matters relating to his/her health.
2. The patient is responsible for reporting perceived risks in his/her care and unexpected changes in his/her condition to his/her responsible practitioner.
3. The patient and family are responsible for asking questions when they do not understand, what a staff member has told them about the patient's care or what they are expected to do.
4. The patient is responsible for following the treatment plan established by his/her physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
5. The patient is responsible for keeping appointments and for notifying the facility or physician when he/she is unable to do so.
6. The patient is responsible for providing his/her healthcare insurance information, and assuring the financial obligations of his/her care are fulfilled as promptly as possible.

7. The patient is responsible for the consequences if he/she refuses treatment or does not follow his/her physician's orders.
8. The patient is responsible for following facility policies and procedures.
9. The patient is responsible for being considerate of the rights of other patients and facility personnel.
10. The patient is responsible for being respectful of the belongings of others in the facility.
11. Parents/family* shall have the responsibility for:
 - Continuing their parenting role to the extent of their ability
 - Being available to participate in decision-making and providing staff with knowledge of parents/family whereabouts

*** The family consists of those individuals responsible for physical and emotional care of the child on a continuous basis, regardless of whether they are related.**

Grievance Policy

GRIEVANCE POLICY

Renaissance Surgery Center maintains the following policy to allow any person to file a complaint.

- Any person or family member who wishes to file a grievance or complaint regarding the quality of care or services at Renaissance Surgery Center should contact the Administrator of Renaissance Surgery Center. (423) 990-1491
- When the complaint is received, the appropriate department supervisor, the medical director and Quality Assurance will be contacted. These parties will work together to thoroughly investigate each grievance or complaint.
- Renaissance Surgery Center will take prompt action to rectify any problem. Furthermore, we will respond to every legitimate grievance in writing within 1 week of completion of investigation of the grievance.
- Renaissance Surgery Center stresses to all of its employees that the act of filing a complaint in no way effects a patient's future access to care or the quality of care or services which he/she receives.

**Tennessee Department of Health
(615) 741-7221**

Email – ohcf.health@tn.govwww.tn.gov/health.html

***Web site for the Office of the Medicare Beneficiary Ombudsman
MEDICARE: 1-800-MEDICARE(Ombudsman)@www.cms.hhs.gov/center/ombudsman.asp**