
PATIENT RIGHTS

The Governing Body of **NCH Bonita Ambulatory Surgery Center, LLC** 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 the Florida Administrative Code Rule 59A-2.0065. The patient rights are as follows:

- A patient has the right to medical and nursing services without discrimination as to age, race, color, religion, sex, sexual orientation, gender identity, national origin, political belief, handicap, disability, or source of payment. It is our intention to treat each patient as a unique individual in a manner that recognizes their basic human rights.
 - The Facility respects the patient rights.
 - To receive care in a safe setting.
 - A patient has the right to be informed of his/her rights at the time of admission.
 - The patient rights must be provided and explained in a language and manner that the patient or the patient's representative or surrogate understands, including patients who do not speak English or with limited communication skills.
 - The patient has the choice of using an interpreter of his or her own, or one supplied by the Facility.
 - The patient who does not speak English shall have access to interpreting and translations services, as necessary.
 - The Facility communicates with the patient who has vision, speech, hearing, or cognitive impairments in a manner that meets the patient's need.
 - The Facility to respect the patient's right to and need for effective communication.
 - The Facility provides information in a manner tailored to the patient's age, language, and ability to understand.
 - Considerate and respectful care including consideration of psychosocial, spiritual, and cultural variables that influence the perceptions of illness.
 - The Facility respects the patient's cultural and personal values, beliefs, and preferences.
 - Be free from any act of discrimination or reprisal against the patient merely because he or she has exercised their rights.
 - The Facility to treat the patient in a dignified and respectful manner that supports the patient's dignity and care is given by competent personnel.
 - To receive, upon request, the names of his/her attending practitioner, the names of all other practitioners directly participating in his/her care, treatment of services and the names and functions of other health care persons having direct contact with the patient.
 - To receive good quality care and high professional standards that are continually maintained and reviewed.
 - To receive full information in layman's terms, concerning diagnosis, treatment, and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give the information to the patient, the information shall be given on his/her behalf to a responsible person.
 - The Facility respects the patient's right to participate in decisions about their care, treatment, or services.
 - Participate in the development, implementation, and revision of his/her care plan.
 - 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.
 - You may appoint a patient representative or surrogate to make health decisions on your behalf, to the extent permitted by law.
 - The Facility respects the right of the patient or surrogate decision-maker to refuse care, treatment, or services in accordance with law and regulation. In this event, the patient must be informed of the medical consequences of this action. In the case of a patient who is mentally incapable of making a rational decision, approval will be obtained from the guardian, next-of-kin, or other person legally entitled to give such approval. The facility will make every effort to inform the patient of alternative facilities for treatment if we are unable to provide the necessary treatment.
 - The Facility involves the patient's family in care, treatment, or services decisions to the extent permitted by the patient or surrogate decision maker, in accordance with law and regulation.
 - The Facility provides the patient or surrogate decision-maker with the information about the following: outcomes of care, treatment, or services that the patient needs to participate in current and future health care decisions; unanticipated outcomes of the patient's care, treatment, or services that are sentinel events as defined by The Joint Commission.
 - The Facility honors the patient's right to give or withhold informed consent.
 - Receive information necessary to give informed consent prior to the start of any procedure and/or treatment, except for emergencies, the practitioner shall obtain the necessary informed consent prior to the start of a procedure. 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.
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- When an emergency occurs and a patient is transferred to another facility, the responsible person shall be notified. The institution to which the patient is to be transferred shall be notified prior to the patient's transfer.
- The Facility protects the patient and respects the patient's rights during research, investigation, and clinical trials.
- A patient or if the patient is unable to give informed consent, a responsible person, has the right to be advised when a practitioner is considering the patient as part of a medical care research program or donor program, and the patient or responsible person, shall give informed consent prior to actual participation in the program. A patient, or responsible person may refuse to continue in a program to which he/she has previously given informed consent.
- The right to refuse drugs or procedures, to the extent permitted by statute, and a practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.
- The Facility respects the patient's privacy and the consideration of privacy concerning his/her own medical care program. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.
- To have records pertaining to his/her medical care treated as confidential except as otherwise provided by law or third-party contractual arrangements.
- A reasonable response to your request for services customarily rendered by the facility, and consistent with your treatment.
- To expect that the Facility will provide information for continuing health care requirements following discharge and the means for meeting them.
- Upon patient request, examine and receive a detailed explanation of your bill including an itemized bill for services received, regardless of sources of payment.
- The right to know the Facility's rules and regulations that apply to your conduct as a patient.
- To expect emergency procedures to be implemented without unnecessary delay.
- The Facility informs the patient about the patient's responsibilities related to their care, treatment, or services.
- To expect good management techniques to be implemented within the Facility. These techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.
- The Facility allows the patient access, request amendment to, and obtain information on disclosures of the patient's health information, in accordance with law and regulation.
- Access and copy information in the medical record at any time during or after the course of treatment. If patient is incompetent, the record will be made available to his/her representative and/or surrogate. Unless access is specifically restricted by the attending practitioner for medical reasons.
- The patient has the right to be free from neglect; exploitation; and verbal, mental, physical, and sexual abuse.
- Receive care, free of restraints, unless medically reasonable issues have been assessed and pose a greater health risk without restraints.
- 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.
- The patient and their family have the right to have complaints reviewed by the Facility.
- 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.
- Complaint 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.

Complaints

- Complaints may be directed to the following Facility Contact: **NCH Bonita Ambulatory Surgery Center, LLC, ATTN: Administrator, 24040 S Tamiami Trail, Suite 201, Bonita Springs, FL 34134 or call (239) 624-6946**
 - Complaints may be directed to the following State Agency: **Agency for Health Care Administration, 1-888-419-3456/1-800-955-8771 Fl. Relay Service (TDD) or use Licensed Health Care Facility Complaint Form at <https://apps.ahca.myflorida.com/hcfc/>**
 - Web site for the Medicare Beneficiary Ombudsman: <https://medicareadvocacy.org/medicare-info/other-resources/>
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