Patient Rights and Responsibilities

A booklet of these patient rights is available upon request.

We know that meeting your health care needs requires trust between you and the people taking care of you. As a patient of Sanford Health, our goal is to protect your rights. You also have responsibilities. Knowing them will help you to make choices about your care that is best for you. Your rights and responsibilities can be read to you in a language you best understand. If you are not able to make choices for yourself, your legal representative may do so on your behalf.

You have the right to be treated with kindness

You have the right to have treatment. You will be treated with respect and worth regardless of your: Physical and/or mental status Sex (Male or Female)

- Age
- Race
- The country where you came from Sexual orientation
- Gender identity or expression Religion • Type of sickness
- Beliefs
- Language
 - If you are able to pay for your care

You have the right to know the names and duties of all the people involved in your care.

. Staff should:

- Tell you their name.
- Tell you their role in your care.
- Give you their work phone number and address when asked.

You have the responsibility to treat others with kindness

It is important to treat others with the same respect and value that you would want for yourself and your family. This includes other patients, their visitors, staff and providers who are giving you care. In the health care environment, you can do this by: • No loud voices.

- No foul language/swearing.Limit the number of guests visiting you at one time.
- Keep a quiet environment when guests are visiting.
- Use your T.V., radio, phones as you need, but quietly.
- Being considerate of your roommate.
- No weapons of any kind.
- No physical or verbal threats or abuse.

You have the right to privacy

Your personal privacy is an important part of your care. We will respect your privacy during:

- Your exams.
- Your talks with your provider and staff.

While you are a Sanford patient, you have the right to:

- Have a person of your same sex in the room with
- you during certain parts of an exam or care.
- Close the curtain around your bed.
- Close your door for privacy.
 Respect and privacy during bathing and/or other cares.
- Ask for no guests to visit you.
- Ask for your status to be confidential.
- Privacy of your:
 - Mail
 - Phone calls
 - E-mails

• Have staff knock on the door and ask to come into your room. Your privacy rights maybe limited in situations due to safety reasons.

You have the responsibility to respect the privacy of others

We ask that you be considerate of other patients. Give them privacy and a quiet environment.

You have the right to confidentiality

Your information is confidential. We will respect your privacy when talking about your health/medical care.

Your health care record and financial information will be read:

- Only by the health care team involved in your care.
- For health care daily work.
- For billing and insurance reasons.
- As health care providers, we are legally required to report information to state and federal agencies. This information may include, but is not limited to:
- Harm after a crime
- Suspected abuse and neglect
- Public health concerns
- Duty to warn if someone is in imminent danger from another person.

The law also permits us to release your health care information in certain situations, such as an emergency.

- Be told of what may happen if you refuse the procedure or treatment.
- Consult with a different specialist.
- Help to develop and carry out your plan of care.
- · Have your spiritual and/or cultural needs met. If these needs may impact your care, you will need to tell your doctor and/or the staff taking care of you.

HEALTH

• Have a family member or other representative, and your provider told promptly

• Domestic partner (including a same sex domestic partner)

Sanford may need to limit visitation. This is to protect the health, safety, or privacy of you

• Reasonable access at reasonable times to protection or advocacy

• Exercise all civil rights. This includes the right to habeas corpus

Routine opportunities for outdoor physical activity unless not allowed by specialty units, or if your health does not allow.

Sanford will not discriminate or retaliate against you (treat you badly) for using your

• Physical and/or mental status

• Gender identity or expression

Patient Relations

Sanford Bismarck

300 N. Seventh St. Bismarck, ND 58501

(701) 323-2873

Patient Relations

1305 W. 18th St

(605) 333-6546

For Joint Commission Accredited locations, at any time, you or your representative

At any time, you or your representative may contact the following:

Sanford Sioux Falls

Sioux Falls, SD 57105

• Participate in the religious worship of your choice.

- Treatment

rights. All rights expressed in this document are for all patients regardless of:

• Sexual orientation

Sanford will not retaliate or discriminate against anyone who has a complaint

If you have any questions or complaints about your rights as a patient at Sanford

Health, you may contact your nurse or any local Sanford facility. You may also call or

• Be told of the policies and practices that relate to:

• Sex

write to Patient Relations at the following locations:

(hey-bee-uh s kawr-puh s). This is defined as a protection from illegal confinement (being held against your will).

- Responsibilities

· How much money you make/what you do for a living

• Have visitors whom you choose for emotional support during

• Withdraw or deny visitation consent at any time.

Refuse services.
Telephone and mail communication.

your stay. This can include, but is not limited to your:

You also have the right to:

admission to Sanford, if you so desire.

• Husband or wife

• Family member

(support) services.

- Patient care

• Friend

of your

or others.

• Age

• Race

Country of origin

Concerns about Your Care:

ReligionBeliefs/Culture

about his or her care.

Patient Relations

Sanford Health of

Northern Minnesota

1300 Anne St. NW

Bemidji, MN 56601

Patient Relations

Fargo, ND 58122 (701) 234-5876

The Joint Commission

One Renaissance Blvd Oakbrook Terrace, IL 60181

600 E. Capitol Ave.

P.O. Box 64970

HHH Building

Washington, DC 20201 (800) 868-1019 (800) 537-7697 (TDD)

Pierre, SD 57501-2536

Telephone: (605) 773-3361

St. Paul, MN 55164-0970

Telephone: (651) 201-4201 Toll Free: (800) 369-7994

www.jointcommission.org

Office of Quality and Patient Safety

(800) 994-6610 Fax: (630) 792-5636

South Dakota Department of Health

Toll Free (in state): (800) 738-2301

Minnesota Department of Health

Office of Health Facility Complaints

Iowa Department of Inspections and Appeals

Health Facilities Division Lucas State Office Building

Sanford Fargo

801 Broadway

may contact:

Language

Know of any professional relationship that may exist between: • Your doctor • Other institutions • Sanford Health Other doctors

State law may require the consent of a relative or legal guardian if you are: • Under the age of 18 • Unconscious • Too ill to give informed consent

- You may be treated without consent if:
- There is a medical emergency.
- · Immediate action must be taken for your well-being
- There is a court ordered mandate.

You have the responsibility to make informed decisions

You are responsible for the decisions you make about your care. We encourage you to gather as much information about your illness as you can. This will help you to make an informed decision. You may be asked to sign a written consent tests and/ or procedures.

- Make sure you understand each document that you are asked to sign.
- If you change your mind or refuse treatment:
 - Tell the staff right away. • Talk to your doctor about your concerns and/ or reasons.

You have a right to develop an Advance Directive Advance Directives are written instructions for a patient's health care in the event he or she is unable to make or communicate decisions. As part of an Advance Directive, a patient may choose someone to make health care decisions on his or her behalf.

An Advance Directive may also be known as or include a:

• Living Will. • Health Care Directive. • Power of Attorney for Health Care.

You have the right to:

- Information about Advance Directives.
- Prepare an Advance Directive.
- Have staff follow your wishes as stated in your Advance Directive:
 - To the degree permitted by state law.
 - To the extent medically appropriate.
 - Subject to limitations on the basis of conscience or other reason permitted by state law.
 - I.C.A. § 144A.8, I.C.A. § 144B.9, N.D.C.C. § 2306.5-09, N.D.C.C. § 23-06.5-12, M.S.A. § 145B.06, M.S.A. § 145C.11, M.S.A. § 145C.15, S.D.C.L. § 3412D-12, S.D.C.L. § 34-12D-19 may be referenced for further details.

Sanford's policy is to follow a patient's Advance Directive once we have knowledge of its contents and the extent to which it is consistent with the law and reasonable standards of medical practice. If a provider cannot honor an Advance Directive, the option of transferring the patient's care to another provider who will comply with the patient's wishes must be discussed.

You are not required to have an Advance Directive. Sanford will not condition care or discriminate against you based on whether or not you have an Advance Directive.

If you have an Advance Directive, you have a responsibility to:

- Give your provider a current copy of your Advance Directive.
 Talk with the person you have selected as your decision maker about your wishes for your care.
- Remove or replace an advanced care directive if it is no longer current. Failing to do so may lead to Sanford giving care in a manner that is no longer in line with your wishes.

You have the right to personal property

• Dentures or partial dentures

• Eyeglasses

• Jewelry

You have the right to have your personal items with you. You may keep your personal items with you at all times unless:

- There is not enough space for you to keep them.
- Due to medical reasons, you cannot have them.
- For your safety, personal property is not allowed on some units.
- · Use or presence of your personal items disrupts Sanford's ability to give you care.

You have the responsibility to secure your valuables

It is your responsibility to make sure that your valuables are secured at all times unless secured by staff per specialty unit policy or protocol. Things that are considered valuable are (but are not limited to): • Hearing aids · Cell phones

• Tablets

iPads

• Computers

such as an emergency.	, , , , , , , , , , , , , , , , , , ,	321 E. 12th St.
Otherwise you must give your permission before your information will be released	Do not leave your valuables where they may be mistakenly disposed of. Examples of	Des Moines, Iowa 50319-0083
Otherwise, you must give your permission before your information will be released.	this include (but are not limited to):	Telephone: (515) 281-4115
Vou also have the right to receive conice of your medical records within a recenchla	Bedside table Meal tray Your hospital bed	Fax: (515) 242-5022
You also have the right to receive copies of your medical records within a reasonable time frame.	bouside tuble filled truy four hospital bou	
time trame.	Sanford Health does not accept financial responsibility if you choose to keep your	North Dakota Department of Health
You have the responsibility to respect the confidentiality of others	personal items with you.	600 E. Boulevard Ave.
	personal terns with you.	Bismarck, N.D. 58505-0200
We ask that you respect the privacy of other patients and families. It is not right to:	You have the right to safe care	Telephone: (800) 472-2622
Look into other patient rooms.	Our goal is to have a safe and comfortable environment for you while you are a	
Ask staff for information about other patients. Ask staff for information about other patients.	patient at Sanford Health.	Minnesota Board of Behavioral Health and Therapy
 Ask staff why a person/patient is here at Sanford. 		2829 University Avenue SE, Suite 210
	We respect your right to:	Minneapolis, MN 55414
You have the right to information about your treatment	 Have care and services that are within professional standards of practice. 	Telephone: (612) 548-2177
Your diagnosis and proposed treatment will be explained to you in terms and	 Medical and personal health care based on your own individual needs. 	
language that you can understand. You may have family members or friends included in this discussion.	Be cared for in a safe environment.	MN Department of Human Services Licensing Division
included in this discussion.	• Be free from being restrained or secluded (separation from others) unless	444 Lafayette Road
Version and the second states to second its	needed for safety reasons.	St Paul, Mn 55155
You can expect your doctor to explain:	• Freedom from maltreatment (abuse or neglect).	Telephone: (651) 431-6500
Your diagnosis.	Not be given medication you do not need.	
• Other choices for care or treatment.	 Have the least amount of restrictions to achieve the goals of your treatment plan. 	Office of Ombudsman for Mental Health and Developmental Disabilities
• The risks and benefits for each of these choices.	Be cared for by staff members who know about you and your plan of care.	121 7th Place E, Suite 420
Likely outcomes.	 Be told what you need to do if there is an emergency. 	St. Paul, Minnesota 55101-2117
	 Expect reasonable continuity of care when you no longer need 	Telephone: (651) 757-1800 or 1-800-657-3506
As a Sanford patient, you can expect:	to be in the hospital and need care after discharge.	
• Information about pain and pain relief measures.	to be in the hospital and need care after discharge.	Behavioral Health Division North Dakota Department of Human Services
• Staff commitment to partner with you to manage your pain.	You have the responsibility to:	1237 W Divide Ave, Suite 1C
Staff who will listen and respond to your reports of pain.	• Give correct and complete information about your:	Bismarck, ND 58501-1208
	• Health history • Medications • Treatments	Telephone: 1-701-328-8920 or 1-800-755-2719 (ND only)
You have the responsibility to ask for clear explanations	• Tell your doctor or person caring for you, about any changes in your health status.	Telephone. 1 701 520 6720 61 1 000 755 2717 (1(D only)
If you do not understand your medical problem and/or your treatment plan is not	 Tell your doctor or the person caring for you about any enanges in your nearth status. 	If Medicare is paying your health care bills and you believe you are being discharged
clear to you, you must tell your health care team. You are responsible for asking	 Keep your appointments for your follow-up care. 	prematurely, you have concerns about your care, or you would like a review of coverage
questions if you do not understand.	• If you need to cancel or reschedule, give plenty of notice.	decisions, you may contact:
You should ask:	 Follow the treatment plans given to you. 	
• Why is this treatment suggested?	 Follow Sanford policies that may affect patient care and conduct, such as: 	Minnesota Quality Improvement Organization South Dakota Quality Improvement Organization
• What other choices do I have?	• Restrictions in the use of tobacco, cigarettes, vaping/ e-cigarettes.	Livanta LLC KEPRO
• What might be the results of this treatment?	• Dietary limits.	BFCC-QIO 5700 Lombardo Center Dr., Suite 100
• Is this treatment new and/or experimental?	• Visiting policies.	10820 Guilford Road, Suite 202 Seven Hills, OH 44131
How long will this treatment take?What will this treatment cost?	• Tell us of any safety concerns you may have.	Annapolis Junction, MD 20701-1105 Toll Free: (888) 317-0891
• What will this treatment cost? • What are the risks of this treatment?	Ten us of any safety concerns you may have.	Telephone: (888) 524-9900 TTY: (855) 843-4776
• What are the side effects of this treatment?	You have the right to know about your bill	TTY: (888) 985-8775
	You have the right to:	
 What are the credentials of the person providing this treatment? 	• Be told of the services that are included in your daily room charge. This	Iowa Quality Improvement Organization North Dakota Quality Improvement Organization
W/L	information will be available before you are admitted and/or during your stay.	Livanta LLC KEPRO
When you and your doctor agree on the best treatment for you, it is important that	• Information for services that are an added charge will also be available.	BFCC-QIO 5700 Lombardo Center Dr., Suite 100
you follow this plan.	 Sanford will help you get information about: 	10820 Guilford Road, Suite 202 Seven Hills, OH 44131
Partial treatment may not help you.If you cannot follow the treatment plan, you need to tell a staff member.	• The expected payments for your care from:	Annapolis Junction, MD 20701-1105 Toll Free: (888) 317-0891
• If you cannot follow the treatment plan, you need to tell a stall member.	- Medicare - Medicaid - A third-party payer	Telephone: (888) 755-5580 TTY: (855) 843-4776
You have the right to make decisions about your care	• What you may be expected to pay.	TTÝ: (888) 985-9295
We value the partnership between you and your caregivers. We want you to have an	• Have your total bill explained to you no matter how your bill is being paid.	
active role in your own healthcare.	• You may call Patient Financial Services at (877) 629-2999.	If you feel Sanford Health has failed to provide services based on effective
We respect your right to:	• You can request an itemized bill from them.	communication or language services, or discriminated in another way on the basis
Choose your provider.		of race, color, national origin, age, disability or sex, you can file a grievance with the
• Choose your provider. • This may be at your own cost. Some care models such as Psychiatry,	As a Sanford patient, you have a responsibility to:	Section 504 Coordinator.
Hospitalists, and Laborists do not allow switching providers unless	Know your insurance coverage policy.	
extreme issues arise.	Know your financial responsibility.	Sanford Section 504 Coordinator
Communicate with your provider.	• Pay your bill.	900 E 54th Street N, Route 6227
 Give informed consent after you receive a clear explanation of: 	• Give Sanford Health the correct insurance information.	Sioux Falls, SD 57104
	• Sanford will bill your health insurance company.	
 Your disease. The risks and benefits of the treatment and other options you 	• You are responsible for paying what is not covered by your insurance.	You can also file a civil rights complaint with the U.S. Department of Health and
	- To a up response to pupility while to not covered by your insurance.	Human Services, Office for Civil Rights electronically through the portal at <u>https://</u>
may choose.	Sanford Health has a Community Care Program. This program gives discounted or	ocrportal.hhs.gov/ocr/smartscreen/main.jsf or by mail or phone.
Ask for the right care.Not be transferred to another facility. The exception to this is:	free care to a patient that meets the eligibility rules. To find out more information,	· · · · · · · · · · · · · · · · ·
	you can:	U.S. Department of Health and Human Services 200 Independence Avenue S.W.
• If you were given a complete explanation for the transfer need.	Call Patient Financial Services: (877) 629-2999	Room 509F
• If you were given other options to the transfer.		HHH Building

- Call Patient Financial Services: (877) 629-2999
- Look on our website: www.sanfordhealth.org

• Give your consent or decline to be a part of research studies.

A prompt response to your questions and requests.

• Refuse a diagnostic procedure or treatment.